2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000003585

FILED Jan 14, 2009 Secretary of State

Entity Na	me: UNITED	VALLEY INSURANCE SERVIO	CES, INC.			
Current P	rincipal Place	of Business:	New Princ	New Principal Place of Business:		
3245 W. FIGARDEN DR. FRESNO, CA 93729				3245 W. FIGARDEN DR. FRESNO, CA 93711		
Current Mailing Address:			New Mailing Address:			
P.O. BOX FRESNO,	28040 CA 93729					
FEI Number: 94-2909761 FEI Number Applied For ()			FEI Number Not Applicable () Certi		Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and	Address of N	ew Registered Agent:	
1201 HAYS TALLAHAS The above	SSEE, FL 3230	01 US	ourpose of changing i	ts registered of	ffice or registered agent, or both,	
SIGNATU	RE:					
	Electron	ic Signature of Registered Ag	ent		Date	
Election Car	mpaign Financing	g Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS			
Title: Name: Address: City-St-Zip:	D () STEVENS, KEN 3245 W. FIGAR FRESNO, CA 9	DEN DR.	Title: Name: Address: City-St-Zip:	D (X) STEVENS, KEN 3245 W. FIGAR FRESNO, CA 9	DEN DR.	
Title: Name: Address: City-St-Zip:	D () EVANS, MARK 3245 W. FIGAR FRESNO, CA		Title: Name: Address: City-St-Zip:	D (X) EVANS, MARK 3245 W. FIGAR FRESNO, CA 9		
Title: Name: Address: City-St-Zip:	P () MCCREARY, M 3245 W. FIGAR FRESNO, CA 9	DEN DR.	Title: Name: Address: City-St-Zip:	P (X) MCCREARY, MI 3245 W. FIGAR FRESNO, CA 9	DEN DR.	
Title: Name: Address: City-St-Zip:	VP () STANLEY, NEA 3245 W. FIGAR FRESNO, CA S	DEN DR.	Title: Name: Address: City-St-Zip:	VP (X) STANLEY, NEAI 3245 W. FIGAR FRESNO, CA 9	DEN DR.	
Title: Name: Address:	ST () COOPER, KEN 3245 W. FIGAR		Title: Name: Address:	ST (X) COOPER, KEN 3245 W. FIGAR	Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

City-St-Zip: FRESNO, CA 93711

SIGNATURE: KEN COOPER ST 01/14/2009

City-St-Zip: FRESNO, CA 93729