

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F92000000471

FILED
Apr 23, 2009
Secretary of State

Entity Name: FLENNIKEN SETTLEMENT SERVICES, INC.

Current Principal Place of Business:

C/O DOLLAR BANK, FSB, MARGOT S CAVALI
3 GATEWAY CENTER, 7 WEST
PITTSBURGH, PA 15222

New Principal Place of Business:

Current Mailing Address:

C/O DOLLAR BANK, FSB, MARGOT S CAVALI
3 GATEWAY CENTER, 7 WEST
PITTSBURGH, PA 15222

New Mailing Address:

FEI Number: 25-1695734 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MCGHEE, C. ANDREW
Address: 2184 GARRICK DRIVE
City-St-Zip: PITTSBURGH, PA 15235

Title: DV () Delete
Name: SHELLEY, JOHN F III
Address: 304 WOODMONT DRIVE
City-St-Zip: CRANBERRY, PA 16066

Title: D () Delete
Name: KOBUS, THOMAS A
Address: 5 FIELDVUE LANE
City-St-Zip: PITTSBURGH, PA 15215

Title: S () Delete
Name: BUTLER, NANCY P
Address: 1696 STURBRIDGE DR
City-St-Zip: SEWICKLEY, PA 15143

Title: D () Delete
Name: WILLIAMS, ALFRED S
Address: 1237 FIRWOOD DRIVE
City-St-Zip: PITTSBURGH, PA 15243

Title: P () Delete
Name: DARCANGELO, JANET
Address: 556 SANDRAE DRIVE
City-St-Zip: PITTSBURGH, PA 15243

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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Address:
City-St-Zip:

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Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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.

SIGNATURE: MARGOT OLIVER CAVALIER

AS

04/23/2009

Electronic Signature of Signing Officer or Director

_____ Date