

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F95000006171

FILED
Apr 22, 2009
Secretary of State

Entity Name: FLA. UNITED, A MICHIGAN CORPORATION

Current Principal Place of Business:

6111 BROKEN SOUND PKWY NW STE 350
BOCA RATON, FL 33487

New Principal Place of Business:

6111 BROKEN SOUND PKWY NW
SUITE 350
BOCA RATON, FL 33487

Current Mailing Address:

6111 BROKEN SOUND PKWY NW STE 350
BOCA RATON, FL 33487

New Mailing Address:

6111 BROKEN SOUND PKWY NW
SUITE 350
BOCA RATON, FL 33487

FEI Number: 65-0629955

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CROWE, MELISSA
6111 BROKEN SOUND PKWY NE STE 350
BOCA RATON, FL 33487 US

Name and Address of New Registered Agent:

CROWE, MELISSA
6111 BROKEN SOUND PKWY NW
SUITE 350
BOCA RATON, FL 33487 US

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: MELISSA CROWE

04/22/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPST () Delete
Name: SCHMIER, JEFFREY L
Address: 6111 BROKEN SOUND PKWY NW, SUITE 360
City-St-Zip: BOCA RATON, FL 33487

Title: DPST () Delete
Name: CROWE, MELISSA
Address: 7777 GLADES RD STE 201
City-St-Zip: BOCA RATON, FL 33434

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPST (X) Change () Addition
Name: SCHMIER, JEFFREY L
Address: 6111 BROKEN SOUND PKWY NW, SUITE 350
City-St-Zip: BOCA RATON, FL 33487

Title: DPST (X) Change () Addition
Name: CROWE, MELISSA
Address: 6111 BROKEN SOUND PKWY NW, SUITE 350
City-St-Zip: BOCA RATON, FL 33487

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: JEFFREY SCHMIER

PRES

04/22/2009

Electronic Signature of Signing Officer or Director

Date