

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 26, 2007 08:00 AM
Secretary of State

DOCUMENT # H36917

1. Entity Name

FIRST U.S. FINANCIAL SERVICES, INC.



Principal Place of Business

728 FENTRESS BLVD
DAYTONA BEACH, FL 32114 US

Mailing Address

728 FENTRESS BLVD
DAYTONA BEACH, FL 32114 US



02052007 No Chg-P CR2E034 (11/05)

4. FEI Number

59-2478840

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

ALTES, HARVEY C.
728 FENTRESS BLVD
DAYTONA BEACH, FL 32114

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

U00000646652
03/06/07-80040-025 150.00

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	ALTES, HARVEY C.
STREET ADDRESS	728 FENTRESS
CITY-ST-ZIP	DAYTONA BEACH, FL
TITLE	D
NAME	ALTES, MICHAEL A.
STREET ADDRESS	1390 BELVEDERE AVE
CITY-ST-ZIP	JACKSONVILLE, FL
TITLE	D
NAME	SQUIRES, MARGARET A.
STREET ADDRESS	728 FENTRESS
CITY-ST-ZIP	DAYTONA BEACH, FL
TITLE	D
NAME	ALTES, J. PATRICK
STREET ADDRESS	728 FENTRESS
CITY-ST-ZIP	DAYTONA BEACH, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Harvey C. Altes
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #