FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

CENTER POINT BUSINESS PARK



FLORIDA DEPARTMENT OF STATE

FILED

Secretary of State

Feb 10 1997 8:00 am

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # J04645

I am an officer or director of the corporati appears in Block 12 or Block 13 if shape

SIGNATURE:

(4)

CENTERPOINT BUSINESS PARK

Mailing Address

UNITED SECURITY ALLIANCE, INC.

1911 US HIGHWAY 301 NORTH, SUITE 300 1911 US HIGHWAY 301 NORTH. SUITE 300 TAMPA FL 33619-2661 TAMPA FL 33619-2661 3. Date incorporated or Qualified 3a. Date of Last Report 08/07/1996 03/13/1986 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-2649445 Not Applicable 21 26 Suite, Apl. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation has liability for intangible tax under s. 199.032, Yes No 30 Florida Statutes 24 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name OTTINGER, J. TERRY 9270 BAY PLAZA BLVD. 82 Street Address (P.O. Box Number is Not Acceptable) SUITE 660 83 **TAMPA FL 33619** 84 City 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or purited name of registored agent and title diapplicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. (96/6) Addition ☐ DELETE Change 1.1 TITLE THLE OTTINGER, J. TERRY 1.2 NAME NAME 4521 MOHICAN TRAIL 1.3 STREET ADDRESS STREET ADDRESS VALRICO FL 1.4 CITY - ST - ZIP CITY-ST-7IF DELETE ___ Change Addition 21 TITLE THILE 22 NAME NAME 23 STREET ADDRESS STREET ADDRESS 2 4 CITY - ST - ZIP CITY - ST - ZIP DELETE ☐ Change Addition THEF 3.1 TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4 CITY-ST-ZIP CITY - S1 - ZIP DELETE Change Addition 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-7IP DELETE ☐ Change Addition 5.1 TITLE THILE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS CHY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition 6.1 TITLE THUE NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** 6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 educer or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

nent with an address.

NAME OF SIGNING OFFICER OR DIRECTOR