## 2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# J48583

Entity Name: US CAPITAL FINANCIAL SERVICES, INC.

FILED Dec 19, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1010 BRYAN ROAD 3206 WEST AZELE STREET BRANDON, FL 33511 US TAMPA, FL 33609 US

Current Mailing Address: New Mailing Address:

PO BOX 2802 PO BOX 6602

BRANDON, FL 335092802 KINGWOOD, TX 77325

FEI Number: 59-2751849 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

NICHOLS, MICHELE S
P. O. BOX 2802
BRANDON, FL 33509
US
HANRAHAN, IMOGENE Z
3206 WEST AZEELE
TAMPA, FL 33509
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: IMOGENE HANRAHAN 12/19/2008

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD ( ) Delete Title: PD (X) Change ( ) Addition

Name:NICHOLS, L. G.,Name:NICHOLS, L. G.,Address:1010 BRYAN ROADAddress:12506 HONEY CREEK TRAIL

City-St-Zip: BRANDON, FL 335116411 City-St-Zip: HUMBLE, TX 77346

Title: VST ( ) Delete Title: VP (X) Change ( ) Addition Name: NICHOLS, MICHELE S Name: NICHOLS, MICHELE S

 Address:
 1010 BRYAN ROAD
 Address:
 12506 HONEY CREEK TRAIL

 City-St-Zip:
 BRANDON, FL 33511
 City-St-Zip:
 HUMBLE, TX 77346

Title: AVP ( ) Delete Title: AVP (X) Change ( ) Addition

 Name:
 MIDKIFF, LEE D
 Name:
 MIDKIFF, LEE D

 Address:
 P. O. BOX 2802
 Address:
 12506 HONEY CREEK TRAIL

 Address:
 P. O. BOX 2802
 Address:
 12506 HONEY CREEK TRAIL

 City-St-Zip:
 BRANDON, FL 33509
 City-St-Zip:
 HUMBLE, TX 77346

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: MICHELE S NICHOLS MSN 12/19/2008