

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K06442

FILED
Apr 08, 2009
Secretary of State

Entity Name: CHOICE FINANCIAL SERVICES, INC.

Current Principal Place of Business:

2627 MCCORMICK DR
STE 101A
CLEARWATER, FL 33759 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 15857
CLEARWATER, FL 33766 US

New Mailing Address:

FEI Number: 59-2862269

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROPER, DAVID B.
2627 MCCORMICK DR
STE 101A
CLEARWATER, FL 33759 US

Name and Address of New Registered Agent:

ROPER, DAVID B PRES
2627 MCCORMICK DR
STE 101A
CLEARWATER, FL 33759 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: DAVID B ROPER

04/08/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: ROPER, DAVID B
Address: 2987 ESTANCIA PL
City-St-Zip: CLEARWATER, FL 33761

Title: SVD () Delete
Name: ROPER, DIANE J.
Address: 2987 ESTANCIA PL
City-St-Zip: CLEARWATER, FL 33761

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
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: DAVID B ROPER

PRES

04/08/2009

Electronic Signature of Signing Officer or Director

Date