
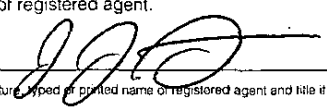
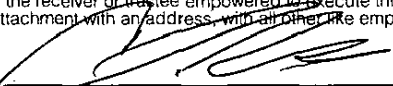


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 04, 2004 8:00 am
Secretary of State

02-04-2004 90029 028 ****61.25

DOCUMENT # N01000003794					
1. Entity Name UNITED FINANCIAL SYSTEMS, INC.					
Principal Place of Business 23123 SR 7 SUITE 340 BOCA RATON FL 33428			Mailing Address 23123 SR 7 SUITE 340 BOCA RATON FL 33428		
2. Principal Place of Business 23123 State Rd 7			3. Mailing Address Same		
Suite, Apt. #, etc. Suite 340			Suite, Apt. #, etc. Same		
City & State Boca Raton, FL			City & State Same		
Zip 33428	Country Palm Beach	Zip Same	Country Same	4. FEI Number 65-1107846	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent DOUGHERTY, JAMES J 23123 SR 7 SUITE 340 BOCA RATON FL 33428			7. Name and Address of New Registered Agent Name LAW OFFICES OF JAMES J. DOUGHERTY, P.A. Street Address (P.O. Box Number is Not Acceptable) 23123 SR 7, SUITE 340B City Boca Raton FL Zip Code 33428		
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  DATE 1/27/04 (NOTE: Registered Agent signature required when reinstating)					
FILE NOW: FEE IS \$61.25 Due By May 1, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		Make Check Payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D/P BOULAHANIS, CHRIS 23123 SR 7 SUITE 340 BOCA RATON FL 33428	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D BOULAHANIS, ALEX 23123 SR 7 SUITE 340 BOCA RATON FL 33428	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D/S DOUGHERTY, JAMES J 23123 SR 7 SUITE 340 BOCA RATON FL 33428	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D SCONZO, KATHY 23123 SR 7 SUITE 340 BOCA RATON FL 33428	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D CORWIN, FRANCIE J 23123 SR 7 SUITE 340 BOCA RATON FL 33428	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I 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 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 617, 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 fee empowered.					
SIGNATURE: 			1/27/04 561-883-2398 Date Daytime Phone #		