

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000007938

FILED
Jul 08, 2008
Secretary of State

Entity Name: CUSAVERS, INC.

Current Principal Place of Business:

711 E. HENDERSON AVENUE
TAMPA, FL 33606

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 172599
TAMPA, FL 336022509

New Mailing Address:

POST OFFICE BOX 172599
ATTN: CONTROLLER
TAMPA, FL 336022509

FEI Number: 03-0603264 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

GRECO, FRANK J
4047 HENDERSON BOULEVARD
TAMPA, FL 33629 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: GERMAIN, TRACI MS.
Address: 4207 SOUTH DALE MABRY # 9203
City-St-Zip: TAMPA, FL 33611

Title: VP () Delete
Name: BAKER, BRAD
Address: 805 EAST RIVER DRIVE
City-St-Zip: TEMPLE TERRACE, FL 33617

Title: TSR () Delete
Name: WILSON, SUZANE
Address: 112 DEBUEL ROAD
City-St-Zip: LUTZ, FL 33549

Title: SEC () Delete
Name: WALSH, LANA
Address: P.O. BOX 5685
City-St-Zip: CLEARWATER, FL 33758

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TRACI GERMAIN

SVP

07/08/2008

Electronic Signature of Signing Officer or Director

Date