2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 23, 2009
Secretary of State

DOCUMENT# P00000116126

Entity Name: BSA FINANCIAL SERVICES, INC.

Current Principal Place of Business:

120 ST RD 312 W
ST AUGUSTINE, FL 32086

New Principal Place of Business:

Current Mailing Address:

120 ST RD 312 W
ST AUGUSTINE, FL 32086

New Mailing Address:

FEI Number: 59-3709963 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

IGLER & DOUGHERTY, P.A.
1501 PARK AVE E
TALLAHASSEE, FL 32308 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: BELL, HARRY J
Address: 120 ST RD 312 W
City-St-Zip: ST AUGUSTINE, FL 32086

Title: D ( ) Delete
Name: DIMARE, WILLIAM F
Address: 3545 US 1 S
City-St-Zip: ST AUGUSTINE, FL

Title: D ( ) Delete
Name: GARNER, CHARLES J
Address: 14 CONTERA DR
City-St-Zip: ST AUGUSTINE, FL

Title: D ( ) Delete
Name: GREEN, HENRY F III
Address: 24 ST AUGUSTINE BLVD
City-St-Zip: ST AUGUSTINE, FL

Title: D ( ) Delete
Name: PORTER, DWAYNE D
Address: 120 ST RD 312 W
City-St-Zip: ST AUGUSTINE, FL

Title: D ( ) Delete
Name: VERSAGGI, MICHAEL
Address: 73 VALENCIA ST
City-St-Zip: ST AUGUSTINE, FL

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:

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: DEBRA K. BLACKBURN AVP 03/23/2009

Electronic Signature of Signing Officer or Director Date