2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000085732

Entity Name: UNCLE SAM'S CHECK CASHING, INC.

JACKSONVILLE, FL 32217

City-St-Zip:

FILED Jan 21, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	JUAN AVE IVILLE, FL 32:	210			
Current N	lailing Addre	ss:	New Mailing Address	New Mailing Address:	
P.O.BOX [*] ORANGE	1747 PARK, FL 320	0671747			
FEI Number	: 59-3740630	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:	
ORANGE The above	SSLEY AVE PARK, FL 320		e purpose of changing its registered	office or registered agent, or both,	
SIGNATUI	RE:				
	Electro	nic Signature of Registered	Agent	Date	
Election Ca	mpaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PP (NICHOLS, JOH 1329 KINGSLE ORANGE PAR	EY AVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	SILVERMAN, S) Delete STEPHEN J RAL OAKS PL S	Title: Name: Address:	()Change ()Addition	

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: JOHN W. NICHOLS PRES 01/21/2009