# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Feb 12, 2009**
**Secretary of State**

DOCUMENT# P01000109133

**Entity Name:** USA CORRESPONDENT SERVICES, INC.

**Current Principal Place of Business:**

2 SOUTH BISCAYNE BLVD, SUITE 3400
MIAMI, FL 33131 US

**New Principal Place of Business:**

2 SOUTH BISCAYNE BLVD
SUITE 3400
MIAMI, FL 33131 US

**Current Mailing Address:**

2 SOUTH BISCAYNE BLVD, SUITE 3400
MIAMI, FL 33131 US

**New Mailing Address:**

2 SOUTH BISCAYNE BLVD
SUITE 3400
MIAMI, FL 33131 US

**FEI Number: 65-1153761** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

GY CORPORATE SERVICES, INC.
2 SOUTH BISCAYNE BLVD, SUITE 3400
MIAMI, FL 33131 US

**Name and Address of New Registered Agent:**

GY CORPORATE SERVICES, INC.
2 SOUTH BISCAYNE BLVD
SUITE 3400
MIAMI, FL 33131 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: _____ 02/12/2009
Electronic Signature of Registered Agent — Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: VP ( ) Delete
Name: BEUTTENMULLER, DONALD J
Address: 777 S FLAGLER DR, SUITE 500 EAST
City-St-Zip: WEST PALM BEACH, FL 33401 US

Title: PD ( ) Delete
Name: VAZQUEZ-BELLO, CLEMENTE
Address: 2 SOUTH BISCAYNE BLVD, SUITE 3400
City-St-Zip: MIAMI, FL 33131 US

Title: VSD ( ) Delete
Name: SCHEER, MARK J
Address: 2 SOUTH BISCAYNE BLVD, SUITE 3400
City-St-Zip: MIAMI, FL 33131 US

Title: CFO ( ) Delete
Name: MCDERMOTT, STEPHEN
Address: 777 S FLAGLER DR, SUITE 500 EAST
City-St-Zip: WEST PALM BEACH, FL 33401 US

Title: C ( ) Delete
Name: SNOWDEN, DAVID
Address: 777 S FLAGLER DR, SUITE 500 EAST
City-St-Zip: WEST PALM BEACH, FL 33401 US

**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:

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: MARK J. SCHEER DSV 02/12/2009
Electronic Signature of Signing Officer or Director — Date