
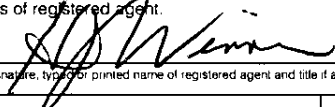
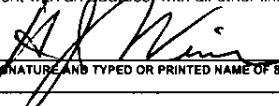


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2008 8:00 am
Secretary of State

05-02-2008 90173 024 ***150.00

DOCUMENT # P02000134233					
1. Entity Name U.O.S. PROPERTIES, INC.					
Principal Place of Business 333 THIRD AVE N ST PETERSBURG, FL 33701			Mailing Address PO BOX 30707 TAMPA, FL 33630		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 57-1148460	
Zip	Country	Zip	Country	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
WINNER, HAROLD J 333 THIRD AVE N ST PETERSBURG, FL 33701			Name Street Address (P.O. Box Number is Not Acceptable) 12450 ROOSEVELT BOULEVARD City FL Zip Code 33716		
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: 		Harold J. Winner		4/25/08	
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	D	<input type="checkbox"/> Delete	TITLE	WINNER, HAROLD J	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WINNER, HAROLD J		NAME		
STREET ADDRESS	333 THIRD AVE N		STREET ADDRESS	12450 ROOSEVELT BOULEVARD	
CITY-ST-ZIP	ST PETERSBURG, FL 33701		CITY-ST-ZIP	ST. PETERSBURG, FL 33716	
TITLE	D	<input type="checkbox"/> Delete	TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SWANSON, CATHY P		NAME		
STREET ADDRESS	333 THIRD AVE N.		STREET ADDRESS	12450 ROOSEVELT BOULEVARD	
CITY-ST-ZIP	SAINT PETERSBURG, FL 33701		CITY-ST-ZIP	ST. PETERSBURG, FL 33716	
TITLE	D	<input type="checkbox"/> Delete	TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BARDIN, C. PETER		NAME		
STREET ADDRESS	333 THIRD AVE N		STREET ADDRESS	12450 ROOSEVELT BOULEVARD	
CITY-ST-ZIP	ST PETERSBURG, FL 33701		CITY-ST-ZIP	ST. PETERSBURG, FL 33716	
TITLE	D	<input type="checkbox"/> Delete	TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	DAVID		NAME	DUNBAR, DAVID	
STREET ADDRESS			STREET ADDRESS	12450 ROOSEVELT BOULEVARD	
CITY-ST-ZIP			CITY-ST-ZIP	ST. PETERSBURG, FL 33716	
TITLE		<input type="checkbox"/> Delete	TITLE	O	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME	MICHAEL JOHNSON	
STREET ADDRESS			STREET ADDRESS	12450 ROOSEVELT BOULEVARD	
CITY-ST-ZIP			CITY-ST-ZIP	ST. PETERSBURG, FL 33716	
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.					
SIGNATURE: 		Harold J. Winner		4/25/08	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date		727 824-8744 Daytime Phone #	