

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000020121

FILED  
Aug 14, 2007  
Secretary of State

Entity Name: USG MANAGEMENT SERVICES OF FLORIDA, INC.

**Current Principal Place of Business:**

14499 N DALE MABRY HWY, STE 215S  
TAMPA, FL 33618

**New Principal Place of Business:**

**Current Mailing Address:**

14499 N DALE MABRY HWY, STE 215S  
TAMPA, FL 33618

**New Mailing Address:**

FEI Number: 42-1615219

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HORTON, GERALD W  
14499 N DALE MABRY HWY, STE 215S  
TAMPA, FL 33618 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PCEO ( ) Delete  
Name: HORTON, GERALD W  
Address: 14499 N DALE MABRY HWY, STE 215S  
City-St-Zip: TAMPA, FL 33618

Title: EVP ( ) Delete  
Name: HORTON, TIMOTHY  
Address: 1910 COCHRAN RD, MANOR OAK # 1, STE 210  
City-St-Zip: PITTSBURGH, PA 15220

Title: VPT (X) Delete  
Name: WESOLOSKI, GERALD  
Address: 14499 N DALE MABRY HWY, STE 215S  
City-St-Zip: TAMPA, FL 33618

Title: S ( ) Delete  
Name: HORTON, SUSAN M  
Address: 14499 N DALE MABRY HWY, STE 215S  
City-St-Zip: TAMPA, FL 33618

Title: AS ( ) Delete  
Name: TOMPKINS, A. STUART  
Address: 25800 NORTHWESTERN HWY, # 1000  
City-St-Zip: SOUTHFIELD, MI 48075

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: EVP (X) Change ( ) Addition  
Name: HORTON, TIMOTHY W  
Address: 1000 TOWN CENTER WAY, STE 300  
City-St-Zip: CANONSBURG, PA 15317

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: GERALD W. HORTON

PRES

08/14/2007

Electronic Signature of Signing Officer or Director

Date