## 2011 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000020121

Entity Name: USG MANAGEMENT SERVICES OF FLORIDA, INC.

FILED Feb 18, 2011 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

14499 N DALE MABRY HWY, STE 215S 14499 N DALE MABRY HWY, STE 215S

TAMPA, FL 336182071 TAMPA, FL 336182071 US

Current Mailing Address: New Mailing Address:

14499 N DALE MABRY HWY, STE 215S 14499 N DALE MABRY HWY, STE 215S

TAMPA, FL 336182071 TAMPA, FL 336182071 US

FEI Number: 42-1615219 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:

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

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: PRES

Name: HORTON, GERALD W

Address: 14499 N DALE MABRY HWY, STE 215S

City-St-Zip: TAMPA, FL 336182071

Title: EVP

Name: HORTON, TIMOTHY W

Address: 1000 TOWN CENTER WAY, STE 300

City-St-Zip: CANONSBURG, PA 15317

Title: SECY

Name: HORTON, SUSAN M

Address: 14499 N DALE MABRY HWY, STE 215S

City-St-Zip: TAMPA, FL 336182071

Title: AS

Name: TOMPKINS, A. STUART

Address: 25800 NORTHWESTERN HWY, # 1000

City-St-Zip: SOUTHFIELD, MI 48075

I hereby 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 all other like empowered.

SIGNATURE: GERALD W HORTON PRES 02/18/2011