## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000114439

FILED Apr 30, 2009 Secretary of State

Entity Name: EMERSON MANAGEMENT U.S. SERVICES, INC.

Current Principal Place of Business:		New Principal Place of Business:		
	ERPOINTE C NTE SPRINGS			
Current Mailing Address:		New Mailing Address:		
	ERPOINTE C NTE SPRINGS			
FEI Number	: 87-0730042	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
Name and	d Address of	Current Registered Agent:	Name and Address	of New Registered Agent:
	MARY ERPOINTE C ITE SPRINGS			
	e named entity e of Florida.	submits this statement for the p	ourpose of changing its register	red office or registered agent, or both,
III tile Stat	c of Florida.			
SIGNATU				
	RE:	nic Signature of Registered Ag	ent	 Date
SIGNATU	RE: Electro	nic Signature of Registered Ag	ent	Date
SIGNATU	RE: Electro	ng Trust Fund Contribution().		Date  GES TO OFFICERS AND DIRECTORS
SIGNATU  Election Cal  OFFICER  Title:  Name:  Address:	RE: Electro mpaign Financir S AND DIREC  VTD ( KYNASTON, N 370 CENTERF	ng Trust Fund Contribution ( ).  CTORS: ) Delete		
SIGNATU	RE: Electro mpaign Financir S AND DIREC VTD ( KYNASTON, N 370 CENTERF ALTAMONTE S D ( JONES, PETE 370 CENTER I	ng Trust Fund Contribution ( ).  CTORS:  ) Delete  EIL  POINTE CIR, #1136  SPRINGS, FL 32701  ) Delete	ADDITIONS/CHANG Title: Name: Address:	GES TO OFFICERS AND DIRECTOR
Election Cal OFFICER Title: Name: Address: City-St-Zip: Title: Name: Address:	RE:  Electro  mpaign Financin  S AND DIRECT  VTD (  KYNASTON, N  370 CENTERF  ALTAMONTES  D (  JONES, PETE  370 CENTERF  ALTAMONTES  V (  EMERSON, EI  370 CENTERF	ng Trust Fund Contribution ( ).  CTORS:  ) Delete  EIL  POINTE CIR, #1136  SPRINGS, FL 32701  ) Delete  R  POINTE CIRCLE, SUITE 1136  SPRINGS, FL 32701  ) Delete	ADDITIONS/CHANG Title: Name: Address: City-St-Zip: Title: Name: Address:	GES TO OFFICERS AND DIRECTORS  ( ) Change ( ) Addition

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: ERIC EMERSON V 04/30/2009