

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000161721

Entity Name: GLOVER USA, INC.

FILED
Apr 30, 2009
Secretary of State

Current Principal Place of Business:

1425 TUSCAWILLA ROAD
SUITE 125
WINTER SPRINGS, FL 32708

Current Mailing Address:

1425 TUSCAWILLA ROAD
SUITE 125
WINTER SPRINGS, FL 32708

New Principal Place of Business:

1425 TUSKAWILLA ROAD
SUITE 125
WINTER SPRINGS, FL 32708

New Mailing Address:

1425 TUSKAWILLA ROAD
SUITE 125
WINTER SPRINGS, FL 32708

FEI Number: 20-4520918

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GLOVER, ALISON
4704 FAIRWAITHER COURT
KISSIMMEE, FL 34758 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GLOVER, ALISON J
Address: 1425 TUSCAWILLA ROAD
City-St-Zip: WINTER SPRINGS, FL 32708

Title: ST () Delete
Name: GLOVER, TREVOR
Address: 1425 TUSCAWILLA ROAD
City-St-Zip: WINTER SPRINGS, FL 32708

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GLOVER, ALISON J
Address: 1425 TUSKAWILLA ROAD
City-St-Zip: WINTER SPRINGS, FL 32708

Title: ST (X) Change () Addition
Name: GLOVER, TREVOR
Address: 1425 TUSKAWILLA ROAD
City-St-Zip: WINTER SPRINGS, FL 32708

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: ALISON GLOVER

P

04/30/2009

Electronic Signature of Signing Officer or Director

Date