

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000073146

**Entity Name:** UNITED SERVICES OF AMERICA INC

**FILED**  
**Sep 12, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

320 NW BURK AVE STE 101  
LAKE CITY, FL 32055

**New Principal Place of Business:**

320 NW BURK AVE  
SUITE - 101  
LAKE CITY, FL 32055

**Current Mailing Address:**

320 NW BURK AVE STE 101  
LAKE CITY, FL 32055

**New Mailing Address:**

320 NW BURK AVE  
LAKE CITY, FL 32055

**FEI Number:** 01-0976928

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PERRY, BRUCE E  
320 NW BURK AVE STE 101  
LAKE CITY, FL 32055 US

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

PERRY, BRUCE E  
320 NW BURK AVE  
LAKE CITY, FL 32055 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

09/12/2011

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: PERRY, BRUCE E  
Address: 320 NW BURK AVE  
City-St-Zip: LAKE CITY, FL 32055

Title: V  
Name: PERRY, SHERRY L  
Address: 320 NW BURK AVE  
City-St-Zip: LAKE CITY, FL 32055

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: BRUCE PERRY

P

09/12/2011

Electronic Signature of Signing Officer or Director

Date