2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 26, 2006
Secretary of State

DOCUMENT# P30384

Entity Name: UNITED SAVERS ASSOCIATION INCORPORATED

Current Principal Place of Business:

300 N. COIT RD STE 1050
RICHARDSON, TX 75080 US

New Principal Place of Business:

300 N. COIT RD STE 350
RICHARDSON, TX 75080 US

Current Mailing Address:

300 N. COIT RD STE 1050
RICHARDSON, TX 75080 US

New Mailing Address:

300 N. COIT RD STE 350
RICHARDSON, TX 75080 US

FEI Number: 75-2109761 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK INC.
11380 PROSPERITY FARMS ROAD #221E
PALM BEACH GARDENS, FL 33410 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

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: KATOSIC, GEORGE R
Address: 2401 TIMBER CREEK DR
City-St-Zip: PLANO, TX 75075

Title: VD ( ) Delete
Name: NORED, ANNE M
Address: 300 N. COIT RD., STE 1050
City-St-Zip: RICHARDSON, TX 75080

Title: SD ( ) Delete
Name: KATOSIC, BARBARA A
Address: 2401 TIMBER CREEK DR
City-St-Zip: PLANO, TX 75075

Title: TD (X) Delete
Name: KATOSIC, MITCHELL M
Address: 300 N. COIT RD., STE 1050
City-St-Zip: RICHARDSON, TX 75080

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: KATOSIC, GEORGE R
Address: 300 N. COIT ROAD SUITE 350
City-St-Zip: RICHARDSON, TX 75080

Title: VTD (X) Change ( ) Addition
Name: NORED, ANNE M
Address: 300 N. COIT RD., STE 350
City-St-Zip: RICHARDSON, TX 75080

Title: SD (X) Change ( ) Addition
Name: KATOSIC, BARBARA A
Address: 1002 RIVA RIDGE
City-St-Zip: WYLIE, TX 75098

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

I hereby certify that the information supplied with this filing does not qualify for the 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANNE M. NORED DVT 01/26/2006

Electronic Signature of Signing Officer or Director — Date