

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P92000013861 (9)

1. Corporation Name

UNITED SAVINGS ASSOCIATION, INC.

Principal Place of Business

3471 N FEDERAL HWY  
#808  
FT LAUDERDALE FL 33306  
US

Mailing Address

3471 N FEDERAL HWY  
#808  
FT LAUDERDALE FL 33306-1052  
US

2. Principal Place of Business

21 2455 E. SUNRISE BLVD.

Suite, Apt. #, etc.

22 SUITE 309

City & State

23 FORT LAUDERDALE, FL.

Zip

24 33304

Country

25 BROWARD

2a. Mailing Address

26 2455 E. SUNRISE BLVD.

Suite, Apt. #, etc.

27 SUITE 309

City & State

28 FORT LAUDERDALE, FL.

Zip

29 33304

Country

30 BROWARD

9. Name and Address of Current Registered Agent

COVEN, DAVID A  
5310 NW 33 AVE SUITE 100  
FT LAUDERDALE FL 33309

3. Date Incorporated or Qualified

12/23/1992

3a. Date of Last Report

08/13/1996

4. FEI Number

59-3157590

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

☐ Yes

☒ No

10. Name and Address of New Registered Agent

81

Name

DAVID A. COVEN, PA.

82

Street Address (P.O. Box Number is Not Acceptable)

800 W. CYPRESS CREEK RD., SUITE 502

83

84

City

FORT LAUDERDALE,

FL

85

Zip Code

33309

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE DAVID A. COVEN, PA.

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

4/18/97

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME P  
CARRUTHERS, ROBERT D  
STREET ADDRESS 5310 NW 33RD AVENUE SUITE 100  
CITY-ST-ZIP FT LAUDERDALE FL

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
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CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

PRESIDENT

☒ Change

☐ Addition

1.2 NAME

ROBERT D. CARRUTHERS

1.3 STREET ADDRESS

2455 E. SUNRISE BLVD., SUITE 309

1.4 CITY-ST-ZIP

FORT LAUDERDALE, FL. 33304

2.1 TITLE

☐ Change

☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

☐ Change

☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

☐ Change

☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

☐ Change

☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

☐ Change

☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [Signature] 4/18/97 (900) 75-2612

FILED  
Apr 23 1997 8:00am  
Secretary of State



CP2E034 (9/96)