## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P96000001456

Entity Name: UNISOURCE FINANCIAL SERVICES CORPORATION

FILED Apr 16, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

8452 W OAKLAND PARK BLVD 3519 N. PINE ISLAND ROAD

SUNRISE, FL 33351 SUNRISE, FL 33351

**Current Mailing Address: New Mailing Address:** 

PO BOX 450826 SUNRISE, FL 33345

FEI Number: 65-0634268 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

STODDARD, HENRY F JR STODDARD, HENRY F JR 3519 N. PINÉ ISLAND ROAD 8452 W OAKLAND PARK BLVD SUNRISE, FL 33351 SUNRISE, FL 33351

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: HENRY F. STODDARD, JR. 04/16/2009

> Date Electronic Signature of Registered Agent

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition STODDARD, HENRY F JR STODDARD, HENRY F JR Name: Name: 3519 N.W. 88TH AVENUE Address: 8452 W OAKLAND PARK BLVD Address:

City-St-Zip: SUNRISE, FL 33351 City-St-Zip: SUNRISE, FL 33351

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.

Ρ SIGNATURE: HENRY F. STODDARD, JR. 04/16/2009