2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2009
Secretary of State

DOCUMENT# P96000077502

Entity Name: TRANSAMERICA FUND SERVICES, INC.

Current Principal Place of Business:

570 CARILLON PKWY
ST PETERSBURG, FL 337161202

New Principal Place of Business:

Current Mailing Address:

PO BOX 5068
CLEARWATER, FL 337585068

New Mailing Address:

FEI Number: 59-3403587 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 333241202 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:	D	( ) Delete
Name:	STAPLES, CHRISTOPHER A	
Address:	570 CARILLON PKWY	
City-St-Zip:	SAINT PETERSBURG, FL 33716	
Title:	DP	( ) Delete
Name:	CARTER, JOHN K	
Address:	570 CARILLON PKWY	
City-St-Zip:	SAINT PETERSBURG, FL 33716	
Title:	SVT	( ) Delete
Name:	HEBURN, KAREN D	
Address:	570 CARILLON PKWY	
City-St-Zip:	SAINT PETERSBURG, FL 33716	
Title:	DSVS	( ) Delete
Name:	GALLAGHER, DENNIS P	
Address:	570 CARILLON PARKWAY	
City-St-Zip:	SAINT PETERSBURG, FL 33716	
Title:	SV	( ) Delete
Name:	CARUSON, JOSEPH P	
Address:	570 CARILLON PKWY	
City-St-Zip:	SAINT PETERSBURG, FL 33716	
Title:	SV	( ) Delete
Name:	SMITH, BRENDA	
Address:	570 CARILLON PKWY	
City-St-Zip:	SAINT PETERSBURG, FL 33716	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	DSVS	(X) Change ( ) Addition
Name:	GALLAGHER, DENNIS P GC	
Address:	570 CARILLON PARKWAY	
City-St-Zip:	SAINT PETERSBURG, FL 33716	
Title:	SV	(X) Change ( ) Addition
Name:	CARUSONE, JOSEPH P	
Address:	570 CARILLON PKWY	
City-St-Zip:	SAINT PETERSBURG, FL 33716	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		

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: DENNIS P GALLAGHER DSVS 04/30/2009

Electronic Signature of Signing Officer or Director — Date