

**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**May 16, 2007 08:00 AM**  
**Secretary of State**

**DOCUMENT # P98000023701**

1. Entity Name  
**UNITED LENDING SOURCE, INC.**



Principal Place of Business  
**75 170TH AVENUE  
NORTH REDINGTON BEACH, FL 33708**

Mailing Address  
**P.O. BOX 8784  
SAINT PETERSBURG, FL 33738**



05042007 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**59-3502565**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional  
Fee Required**

**6. Name and Address of Current Registered Agent**

**WRIGHT, LISA J  
P. O. BOX 8784  
ST. PETERSBURG, FL 33738**

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

000000754684  
05/31/07-80006-010 150.00

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reappointing) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
Due by September 14, 2007**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00 May Be  
Added to Fees**

In accordance with s. 607.193(2)(b), F.S., the  
corporation did not receive the prior notice.

**10. OFFICERS AND DIRECTORS**

TITLE **D**  
NAME **WRIGHT, LISA J**  
STREET ADDRESS **75 170TH AVENUE**  
CITY-ST-ZIP **NORTH REDINGTON BEACH, FL 33708**

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:**

*Lisa J. Wright* **LISA J. Wright** 5/14/07  
727-391-1657

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #