2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000084686

Entity Name: OS ASSET, INC

FILED Apr 15, 2009 Secretary of State

y						
Current Principal Place of Business:				New Principal Place of Business:		
2202 N. WESTSHORE BLVD., 5TH FLOOR TAMPA, FL 33607				2202 N. WESTSHORE BLVD., 5TH FLOOR LEGAL DEPT TAMPA, FL 33607		
Current Mailing Address:				New Mailing Address:		
2202 N. WESTSHORE BLVD., 5TH FLOOR TAMPA, FL 33607				2202 N. WESTSHORE BLVD., 5TH FLOOR LEGAL DEPT TAMPA, FL 33607		
FEI Number	: 59-3602393	FEI Number Applied For()	FEI Numb	er Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
KADOW, JOSEPH J 2202 N. WESTSHORE BLVD., 5TH FLOOR TAMPA, FL 33607 US				KADOW, JOSEPH J 2202 N. WESTSHORE BLVD., 5TH FLOOR LEGAL DEPT TAMPA, FL 33607 US		
	named entity sul e of Florida.	omits this statement for the p	purpose of o	changing its registered	d office or registered agent, or both,	
SIGNATURE:					04/15/2009	
	Electronic	Signature of Registered Ag	ent		Date	
Election Car	mpaign Financing T	rust Fund Contribution ().				
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	CFOD () DO MONTGOMERY, E 2202 N. WESTSH TAMPA, FL 33607	DIRK A ORE BLVD., 5TH FLOOR	۸ <u>م</u>	itle: lame: .ddress: city-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VPD () DO LEFFERTS, KELL 2202 N WESTSHO TAMPA, FL 33607	Y M DRE BLVD 5TH FL	۸ <u>م</u>	ïtle: lame: .ddress: city-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	EVPS () DO KADOW, JOSEPH 2202 N WESTSHO TAMPA, FL 33607	J DRE BLVD., 5TH FL	۸ <u>م</u>	itle: lame: .ddress: city-St-Zip:	() Change () Addition	
Title: Name:	CEO () De ALLEN, A WILLIAN			itle: lame:	() Change () Addition	

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.

Address:

City-St-Zip:

SIGNATURE: JOSEPH J. KADOW EVPS 04/15/2009

2202 N WEST SHORE BLVD 5TH FL

TAMPA, FL 33607

Address:

City-St-Zip: