## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# S89849

PALM BEACH GRDNS, FL

City-St-Zip:

Entity Name: ST. JAMES FINANCIAL SERVICES, INC.

FILED Apr 16, 2009 Secretary of State

Current P	rincipal Place	of Business:	New Principal Place of Business:		
4500 PGA BOULEVARD SUITE 303 B					
PALM BEA	ACH GARDEN	S, FL 33418			
Current M	lailing Addres	ss:	New Mailing Address	New Mailing Address:	
SUITE 303	BOULEVARD B ACH GARDEN	S, FL 33418			
FEI Number:	: 65-0291144	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	Address of C	urrent Registered Agent:	Name and Address o	f New Registered Agent:	
4500 PGA 303-B		S, FL 33418 US			
	named entity s e of Florida.	submits this statement for the	purpose of changing its registered	d office or registered agent, or both,	
SIGNATU	RE:				
	Electror	ic Signature of Registered Ac	gent	Date	
Election Car	mpaign Financing	g Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGI	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PRES ( ) DUBE, THERES 4500 PGA BLV PALM BEACH (	D., SUITE303-B	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address:	CABRAL, WEN	Delete DY S. D., SUITE 303-B	Title: Name: Address:	() Change () Addition	

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: WENDY S. CABRAL VP 04/16/2009