

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V41766

FILED
Apr 10, 2009
Secretary of State

Entity Name: COUNTERSIGNATURE AGENCY, INC.

Current Principal Place of Business:

7840 WOODLAND CENTER BLVD.
TAMPA, FL 33614 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 30094
TAMPA, FL 336303094 US

New Mailing Address:

FEI Number: 06-1345091

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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: SD () Delete
Name: HERNANDEZ, RENE
Address: 7840 WOODLAND CENTER BLVD
City-St-Zip: TAMPA, FL 33614

Title: V () Delete
Name: GUERTIN, WENDY
Address: 7840 WOODLAND CENTER BLVD
City-St-Zip: TAMPA, FL 33614

Title: T () Delete
Name: HILL, JOHN S
Address: 7840 WOODLAND CENTER BLVD
City-St-Zip: TAMPA, FL 33614 US

Title: CS () Delete
Name: FANDEL, EDWARD J
Address: 7840 WOODLAND CENTER BLVD.
City-St-Zip: TAMPA, FL 33614 US

Title: TD (X) Delete
Name: FANDEL, EDWARD J
Address: 7840 WOODLAND CENTER BLVD
City-St-Zip: TAMPA, FL 33614

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: PD (X) Change () Addition
Name: ALANIZ, HECTOR J
Address: 7840 WOODLAND CENTER BLVD.
City-St-Zip: TAMPA, FL 33614 US

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: RENE HERNANDEZ

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04/10/2009

Electronic Signature of Signing Officer or Director

Date