

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED
Mar 12, 2007
Secretary of State**

DOCUMENT# P97000027791

Entity Name: FAJANS FINANCIAL SERVICES, INC.

Current Principal Place of Business:103 SOLANA RD
SUITE A
PONTE VEDRA BEACH, FL 32082 US**New Principal Place of Business:****Current Mailing Address:**P.O. BOX 2349
PONTE VEDRA BEACH, FL 320042349 US**New Mailing Address:**

FEI Number: 59-3437678

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:FAJANS, ROBERT G
103 SOLANA RD
SUITE A
PONTE VEDRA BEACH, FL 32082 US**Name and Address of New Registered Agent:**WERNER, TIMOTHY G
103 SOLANA RD
SUITE A
PONTE VEDRA BEACH, FL 32082 US

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: TIMOTHY G. WERNER

03/12/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:Title: PRES () Delete
Name: FAJANS, ROBERT G
Address: 103A SOLANA ROAD
City-St-Zip: PONTE VEDRA BEACH, FL 32082Title: VP (X) Delete
Name: SWAIN, JOHN R
Address: 103A SOLANA ROAD
City-St-Zip: PONTE VEDRA BEACH, FL 32082Title: VP (X) Delete
Name: SWAIN, PATRICIA F
Address: 103A SOLANA ROAD
City-St-Zip: PONTE VEDRA BEACH, FL 32082Title: VP (X) Delete
Name: FAJANS, LYNDIA L
Address: 103A SOLANA ROAD
City-St-Zip: PONTE VEDRA BEACH, FL 32082Title: VP () Delete
Name: WERNER, TIMOTHY G
Address: 103A SOLANA ROAD
City-St-Zip: PONTE VEDRA BEACH, FL 32082Title: VP (X) Delete
Name: WERNER, SUZANNE F
Address: 103A SOLANA ROAD
City-St-Zip: PONTE VEDRA BEACH, FL 32082**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: () Change () Addition
Name:
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City-St-Zip:Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: TIMOTHY G. WERNER

VP

03/12/2007

Electronic Signature of Signing Officer or Director

Date