

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 650851

FILED
Apr 25, 2007
Secretary of State

Entity Name: FOUNDATION FINANCIAL SERVICES, INC.

Current Principal Place of Business:

12671HWY 98 EAST
SUITE 203
DESTIN, FL 32550

Current Mailing Address:

PO BOX 6160
DESTIN, FL 32550

New Principal Place of Business:

12671US HWY 98 WEST
FOUNTAIN PLAZA EAST SUITE 203
MIRAMAR BEACH, FL 32550

New Mailing Address:

PO BOX 6160
MIRAMAR BEACH, FL 32550

FEI Number: 59-2022758

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BURKETT, JEROME W SR
12671 HWY 98 EAST
SUITE 203
DESTIN, FL 32550 US

Name and Address of New Registered Agent:

BURKETT, JEROME W SR
12671 US HWY 98 WEST
FOUNTAIN PLAZA EAST SUITE 203
MIRAMAR BEACH, FL 32550 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:

04/25/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BURKETT, JEROME W SR
Address: 360 INIDAN BAY DRIVE
City-St-Zip: FREEPORT, FL 32439

Title: VD () Delete
Name: BURKETT, JEROME W JR
Address: 882 THE MASTERS BLVD.
City-St-Zip: SHALIMAR, FL 32579

Title: V () Delete
Name: FIELDS, DIANNE L
Address: 360 INDIAN BAY DRIVE
City-St-Zip: FREEPORT, FL 32439

Title: VST () Delete
Name: WOLFGRAM, NICHOLAS J
Address: 1077 NAPA WAY
City-St-Zip: NICEVILLE, FL 32578

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BURKETT, JEROME W SR
Address: 714 SAILFISH AVENUE
City-St-Zip: FORT WALTON BEACH, FL 32548

Title: () Change () Addition
Name:
Address:
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 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: JEROME W BURKETT SR

PD

04/25/2007

Electronic Signature of Signing Officer or Director

Date