

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 650851

FILED  
Apr 30, 2008  
Secretary of State

Entity Name: FOUNDATION FINANCIAL SERVICES, INC.

**Current Principal Place of Business:**

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

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 6160  
MIRAMAR BEACH, FL 32550

**New Mailing Address:**

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 US HWY 98 WEST  
FOUNTAIN PLAZA EAST SUITE 203  
MIRAMAR BEACH, FL 32550 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: PD ( ) Delete  
Name: BURKETT, JEROME W SR  
Address: 714 SAILFISH AVENUE  
City-St-Zip: FORT WALTON BEACH, FL 32548

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: ( ) 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:  
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

04/30/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date