2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000006875

Entity Name: FORESTERS FINANCIAL PARTNERS, INC.

FILED Feb 05, 2008 Secretary of State

Current Principal Place of Business:			New Princi	New Principal Place of Business:		
	1YTH DR #103 ARITA, CA 913	55				
Current Mailing Address:			New Mailir	New Mailing Address:		
28005 N SMYTH DR #103 SANTA CLARITA, CA 91355						
FEI Number:	FEI Number: 51-0604752 FEI Number Applied For () FEI Nu		FEI Number Not Appli	cable () Certifi	cate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					egistered Agent:	
REGISTERED AGENT SOLUTIONS, INC. 155 OFFICE PLAZA DR., SUITE A TALLAHASSEE, FL 32301 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:						
	Electronic	Signature of Registered Agent			Date	
Election Campaign Financing Trust Fund Contribution ().						
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	DPST () D GOTTSHALL, IRA 28005 N SMYTH SANTA CLARITA,	DR #103	Title: Name: Address: City-St-Zip:	()Change	e () Addition	
Title: Name: Address: City-St-Zip:	D () D MOHACSI, GEOR 28005 N SMYTH SANTA CLARITA,	DR #103	Title: Name: Address: City-St-Zip:	()Change	e () Addition	
Title: Name: Address: City-St-Zip:	D () D MEYERHOLZ, JO 60 FOREST DRIV SHORT HILLS, N	/E	Title: Name: Address: City-St-Zip:	()Change	e()Addition	
Title: Name: Address: City-St-Zip:	DV () D DURFEE, CHARL 1723 SOUTH RIV EAGLE, ID 83610	ERCHASE WAY	Title: Name: Address: City-St-Zip:	()Change	e () Addition	
Title: Name: Address: City-St-Zip:	CFO () D AUPPERLE, STE EMBER GLEN DF HALTOM CITY, TX	RIVE	Title: Name: Address: City-St-Zip:	()Change	e()Addition	
Title: Name: Address: City-St-Zip:	V () D PRATT, JONATH/ 110 CUMMINGS 0 BEVERLY, MA 0	CENTRE	Title: Name: Address: City-St-Zip:	V (X) Change PRATT, JONATHAN J 218 BRAY STREET BEVERLY, MA 01930	e()Addition	

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: KATHARINE E. ROUNTHWAITE AS 02/05/2008