## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F96000004680

Entity Name: FBG SERVICE CORPORATION

FILED Jan 17, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 407 S 27TH AVE OMAHA, NE 68131 **Current Mailing Address: New Mailing Address:** 407 S 27TH AVE OMAHA, NE 68131 FEI Number: 47-0460916 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: LAUTENSCHLAGER, KARIN LAUTENSCHLAGER, KARIN 120 VENETIAN WAY 2205 SYKES CREEK DR MERRITT ISLAND, FL 32953 SUITE 25 US MERRITT ISLAND, FL 32953 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: KARIN LAUTENSCHLAGER 01/17/2008 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete () Change () Addition SIMMONDS, WAYNE E Name: Name: 407 S 27TH AVE Address: Address: City-St-Zip: OMAHA, NE 68131 City-St-Zip: P/D Title: Title: ( ) Delete () Change () Addition Name: GOGETAP, TERRI Name: 407 S 27TH AVE Address: Address: OMAHA, NE 68131 City-St-Zip: City-St-Zip: Title: Title: V/D ( ) Delete () Change () Addition SIMMONDS, JAMES Name: Name: 407 S 27TH AVE Address: Address: City-St-Zip: OMAHA, NE 68131 City-St-Zip: Title: ( ) Delete Title: () Change () Addition CLARK, KATHY Name: Name: Address: 407 S 27TH AVE Address: City-St-Zip: OMAHA, NE 68131 City-St-Zip: Title: Title: ( ) Delete (X) Change ( ) Addition BENJAMIN-ALVARADO, BENJAMIN Name: Name: BENJAMIN-ALVARADO, JONATHAN 6001 DODGE ST. Address: 6001 DODGE ST. Address: City-St-Zip: OMAHA, NE 68182 City-St-Zip: OMAHA, NE 68182 ( ) Delete Title: Title: () Change () Addition Name: SUTTLE, JIM Name: 1878 FARNAM Address: Address: City-St-Zip: City-St-Zip: OMAHA, NE 68183

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: KATHY CLARK S 01/17/2008