2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 21, 2009
Secretary of State

DOCUMENT# F96000004680

Entity Name: FBG SERVICE CORPORATION

Current Principal Place of Business:

407 S 27TH AVE
OMAHA, NE 68131

New Principal Place of Business:

Current Mailing Address:

407 S 27TH AVE
OMAHA, NE 68131

New Mailing Address:

FEI Number: 47-0460916 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LAUTENSCHLAGER, KARIN
2205 SYKES CREEK DR
MERRITT ISLAND, FL 32953 US

Name and Address of New Registered Agent:

HORNE, ROMONA
1644 PEARL ST NORTH
JACKSONVILLE, FL 32206 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: ROMONA HORNE 01/21/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: T/D ( ) Delete
Name: SIMMONDS, WAYNE E
Address: 407 S 27TH AVE
City-St-Zip: OMAHA, NE 68131

Title: P/D ( ) Delete
Name: GOGETAP, TERRI
Address: 407 S 27TH AVE
City-St-Zip: OMAHA, NE 68131

Title: V/D ( ) Delete
Name: SIMMONDS, JAMES
Address: 407 S 27TH AVE
City-St-Zip: OMAHA, NE 68131

Title: S ( ) Delete
Name: CLARK, KATHY
Address: 407 S 27TH AVE
City-St-Zip: OMAHA, NE 68131

Title: D ( ) Delete
Name: BENJAMIN-ALVARADO, JONATHAN
Address: 6001 DODGE ST.
City-St-Zip: OMAHA, NE 68182

Title: D ( ) Delete
Name: SUTTLE, JIM
Address: 1878 FARNAM
City-St-Zip: OMAHA, NE 68183

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:

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: KATHY CLARK S 01/21/2009
Electronic Signature of Signing Officer or Director Date