

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000001200

Entity Name: EMPIRE MANAGEMENT SERVICES, INC.

FILED  
Feb 05, 2008  
Secretary of State

## Current Principal Place of Business:

13810 FNB PKWY  
OMAHA, NE 681545202

## New Principal Place of Business:

## Current Mailing Address:

13810 FNB PKWY  
OMAHA, NE 681545202

## New Mailing Address:

FEI Number: 47-0794581

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

STAZZONE, JOE  
99 NORTH ATLANTIC AVENUE  
COCOA BEACH, FL 32931 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: DP ( ) Delete  
Name: HELLER, ROBERT  
Address: 13810 FNB PKWY  
City-St-Zip: OMAHA, NE 681545202

Title: DVP ( ) Delete  
Name: KINSLER, JOHN  
Address: 13810 FNB PKWY  
City-St-Zip: OMAHA, NE 681545202

Title: DS/T ( ) Delete  
Name: MIHULKA, PAUL  
Address: 13810 FNB PKWY  
City-St-Zip: OMAHA, NE 68154

Title: AS ( ) Delete  
Name: GIBBONS, RYAN J  
Address: 1400 AMERICAN LN  
City-St-Zip: SCHAUMBURG, IL 60196

Title: AS ( ) Delete  
Name: HAUSER, RICHARD  
Address: 1400 AMERICAN LANE  
City-St-Zip: SCHAUMBURG, IL 60196

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D/PR (X) Change ( ) Addition  
Name: HELLER, ROBERT  
Address: 13810 FNB PKWY  
City-St-Zip: OMAHA, NE 681545202

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: RYAN GIBBONS

AS

02/05/2008

Electronic Signature of Signing Officer or Director

Date