

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H61778

Entity Name: B.F.S.B. FINANCIAL SERVICES, INC.

FILED
Aug 18, 2008
Secretary of State

Current Principal Place of Business:

5537 SHELDON RD
STE. D
TAMPA, FL 33615 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 31125
STE. D
TAMPA, FL 336313125 US

New Mailing Address:

FEI Number: 59-2811193

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

YOUNG, RONALD A
5537 SHELDON ROAD,
STE. D
TAMPA, FL 33615 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: D (X) Delete
Name: NERNBERG, A. RICHARD
Address: 5537 SHELDON RD., STE. D
City-St-Zip: TAMPA, FL 33615

Title: PD () Delete
Name: YOUNG, RONALD A
Address: 5537 SHELDON RD., SUITE D
City-St-Zip: TAMPA, FL 33615

Title: VPTD (X) Delete
Name: BEITELSHEES, KERWIN L
Address: 5537 SHELDON RD, STE D
City-St-Zip: TAMPA, FL 33615

Title: S (X) Delete
Name: SOWRY, BRENDA
Address: 5537 SHELDON RD., STE D
City-St-Zip: TAMPA, FL 33615

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: RON YOUNG

PD

08/18/2008

Electronic Signature of Signing Officer or Director

Date