


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 07, 2008 08:00 A
Secretary of State

DOCUMENT # J93986


1. Entity Name
FERMAN MANAGEMENT SERVICES CORPORATION



Principal Place of Business
**1306 W. KENNEDY BLVD
 TAMPA, FL 33060-1849**

Mailing Address
**1306 W. KENNEDY BLVD
 TAMPA, FL 33060-1849**

DO NOT WRITE IN THIS SPACE



02012008 No Chg-P CR2E034 (11/05)

4. FEI Number 59-2928466	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

8. Name and Address of Current Registered Agent

**STRASKE II, STEPHEN B
 1306 W. KENNEDY BLVD
 TAMPA, FL 33606-1849**

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP FERMAN, JR, JAMES L 1306 W. KENNEDY BLVD TAMPA, FL 33606
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD FARRIOR, PRESTON L 1306 W. KENNEDY BLVD TAMPA, FL 33606
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSTD STRASKE, STEPHEN B II 1306 W. KENNEDY BLVD TAMPA, FL 33606
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V TEW, DOUGLAS 1306 W. KENNEDY BLVD. TAMPA, FL 33606
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GOMEZ, EDWARD JR 1306 W KENNEDY BLVD TAMPA, FL 33606
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

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 02/15/08-80051-012 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **2/6/08** **(813)251-2765**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #