

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

DOCUMENT # M07000003630 1. Entity Name FOUNDATION MANAGEMENT SERVICES, LLC	
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Principal Place of Business 4353 N. RIDGE COURT PINCKNEY, MI 48169	Mailing Address 4353 N. RIDGE COURT PINCKNEY, MI 48169
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DO NOT WRITE IN THIS SPACE



07302008No Chg-LLC

CR2E083 (12/07)

4. FEI Number 01-0597240	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent SMALL, KAREN 10901 FRONT BEACH ROAD, #604 T-1 PANAMA CITY BEACH, FL 32407
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**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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

**FILE NOW!!! FEE IS \$138.75
Due by September 12, 2008**

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SMALL, WILLIAM EDWIN 10559 CITATION DRIVE, #204 BRIGHTON, MI 48116
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08/04/08-80002-017 138.75

**DO NOT WRITE
IN THIS SPACE**

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #