2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000006947

Entity Name: FREEDOM DEBT MANAGEMENT, INC.

FILED Jan 04, 2005 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:				
	DERAL HWY, ON, FL 3343							
Current Mailing Address:				New Mailing Address:				
	DERAL HWY, ON, FL 3343							
FEI Number:	52-2376670	FEI Number Applied For ()	FEI Num	nber Not Appli	cable ()	Certificate of Status Des	sired (X)	
Name and	Address of C	urrent Registered Agent:		Name and	Address of N	New Registered Agen	t:	
LAW OFFICES OF JAMES J DOUGHERTY, P.A.A 4400 N. FEDERAL HIGHWAY STE. 410 BOCA RATON, FL 33431 US				LAW OFFICES OF JAMES J DOUGHERTY, P.A. 4000 N. FEDERAL HIGHWAY STE. 202B BOCA RATON, FL 33431 US				
The above in the State		submits this statement for the pu	irpose of	f changing it	s registered o	office or registered age	nt, or both,	
SIGNATURE: JAMES J. DOUGHERTY, ESQ.				01/04/2005				
		ic Signature of Registered Ager	nt			Date		
OFFICERS AND DIRECTORS:				ADDITION	S/CHANGES	TO OFFICERS AND I	DIRECTORS:	
Title: Name: Address: City-St-Zip:	JURASINSKI, A	AL HWY, SUITE 202		Title: Name: Address: City-St-Zip:	()) Change () Addition		
Title: Name: Address: City-St-Zip:	KRIEDELL, KE	AL HWY, SUITE 202		Title: Name: Address: City-St-Zip:	()) Change ()Addition		
Title: Name: Address: City-St-Zip:	DOUGHERTY,	AL HWY, SUITE 202		Title: Name: Address: City-St-Zip:	()) Change () Addition		
Title: Name: Address: City-St-Zip:	D () PRICE, JOHN I 400 VILLAGE B W. PALM BEAC	LVD., SUITE B		Title: Name: Address: City-St-Zip:	()) Change ()Addition		
Title: Name: Address: City-St-Zip:	D () FAGA, SEAN M 3613 CORAL S CORAL SPRING	PRINGS DR.		Title: Name: Address: City-St-Zip:	D (X MURRAY, TIMO 235 NW 40TH A DELRAY BEAC	AVENUE		
Title: Name: Address: City-St-Zip:	MONERAU, STI 5031 SW 13TH			Title: Name: Address: City-St-Zip:	()) Change()Addition		

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAMES J. DOUGHERTY SD 01/04/2005