## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N02000006947

Entity Name: FREEDOM DEBT MANAGEMENT, INC.

FILED Feb 06, 2008 Secretary of State

4000 N. FEDERAL HWY, SUITE 202 941A CLINT MOORE RD. BOCA RATON, FL 33431 BOCA RATON, FL 33487

Current Mailing Address: New Mailing Address:

4000 N. FEDERAL HWY, SUITE 202 941A CLINT MOORE RD. BOCA RATON, FL 33431 BOCA RATON, FL 33487

FEI Number: 52-2376670 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

JURASINSKI, ANTHONY
4000 N. FEDERAL HWY, SUITE 202
BOCA RATON, FL 33431 US
JURASINSKI, ANTHONY
941A CLINT MOORE RD.
BOCA RATON, FL 33487 US

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: ANTHONY JURASINSKI 02/06/2008

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:PSCD () DeleteTitle:PSCD (X) Change () AdditionName:JURASINSKI, ANTHONY MRName:JURASINSKI, ANTHONY MRAddress:4000 N. FEDERAL HWY, SUITE 202Address:941A CLINT MOORE RDCity-St-Zip:BOCA RATON, FL 33431City-St-Zip:BOCA RATON, FL 33487

Title: () Delete Title: (X) Change ( ) Addition TOKARSKI, CHRISTINE MS Name: TOKARSKI, CHRISTINE MS Name: Address: 4000 N. FEDERAL HWY, SUITE 202 Address: 941A CLINT MOORE RD. City-St-Zip: BOCA RATON, FL 33431 City-St-Zip: BOCA RATON, FL 33487

Title: D ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 PRICE, JOHN MR
 Name:

 Address:
 2523 INDIAN BLUFFS DRIVE
 Address:

 City-St-Zip:
 DACULA, GA 30019
 City-St-Zip:

Title: D ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 BARTON, WAYNE
 Name:

 Address:
 269 N.E. 14TH ST.
 Address:

 City-St-Zip:
 BOCA RATON, FL 33432
 City-St-Zip:

Title: D ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 BOGEN, YALE
 Name:

 Address:
 200 SO. BISCAYNE BLVD #1818
 Address:

 City-St-Zip:
 MIAMI, FL 33131
 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANTHONY JURASINSKI PRES 02/06/2008

Electronic Signature of Signing Officer or Director

Date