

**2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**May 15, 2008**  
**Secretary of State**

DOCUMENT# N98000005479

**Entity Name:** MILITARY DEBT MANAGEMENT AGENCY, INC.**Current Principal Place of Business:**39 MAPLE AVE  
SHALIMAR, FL 32579**New Principal Place of Business:****Current Mailing Address:**P.O. BOX 726  
SHALIMAR, FL 32579**New Mailing Address:****FEI Number:** 59-3533869**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**MONETARY MANAGEMENT SYSTEMS, INC.  
39 MAPLE AVE  
SHALIMAR, FL 32579 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

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: BREAZEALE, SOMMAI J  
Address: 39 MAPLE AVE  
City-St-Zip: SHALIMAR, FL 32579

Title: D ( ) Delete  
Name: BREAZEALE II, B T MFM,RFP  
Address: 39 MAPLE AVE  
City-St-Zip: SHALIMAR, FL 32579

Title: VP ( ) Delete  
Name: PIJMA, KIMBERLY H  
Address: 4086 INDIAN TRAIL  
City-St-Zip: DESTIN, FL 32541

Title: C ( ) Delete  
Name: PETERSEN, NICKOLAS G ESQ  
Address: 12 OLD FERRY ROAD  
City-St-Zip: SHALIMAR, FL 32579

Title: D ( ) Delete  
Name: VAN HOESSEN, WILLIAM  
Address: 1687 HWY 98 W #3  
City-St-Zip: MARRY ESTHER, FL 32569

Title: VP (X) Delete  
Name: FOLEY, ROBERT M  
Address: 254 ECHO CIR  
City-St-Zip: FORT WALTON BEACH, FL 32548

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: C (X) Change ( ) Addition  
Name: BREAZEALE II, B T MFM,RFP  
Address: 39 MAPLE AVE  
City-St-Zip: SHALIMAR, FL 32579

Title: D (X) Change ( ) Addition  
Name: PIJMA, KIMBERLY H  
Address: 4086 INDIAN TRAIL  
City-St-Zip: DESTIN, FL 32541

Title: D (X) Change ( ) Addition  
Name: VAN HOESSEN, WILLIAM  
Address: 1687 HWY 98 W #3  
City-St-Zip: MARY ESTHER, FL 32569

Title: VP (X) Change ( ) Addition  
Name: FOLEY, ROBERT M  
Address: 254 ECHO CIR  
City-St-Zip: FORT WALTON BEACH, FL 32548

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: B T BREAZEALE II

C

05/15/2008

Electronic Signature of Signing Officer or Director

Date