2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Jun 11, 2008
Secretary of State

DOCUMENT# P02000034578

Entity Name: FIRST SERVICE ADMINISTRATORS, INC.

Current Principal Place of Business:

3035 LAKELAND HILLS BOULEVARD
LAKELAND, FL 338052225 US

New Principal Place of Business:

Current Mailing Address:

3035 LAKELAND HILLS BOULEVARD
LAKELAND, FL 338052225 US

New Mailing Address:

FEI Number: 41-2035345 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HAUSER, JEFFREY
3035 LAKELAND HILLS BOULEVARD
LAKELAND, FL 338052225 US

Name and Address of New Registered Agent:

RAPSON, CHANDLER
3035 LAKELAND HILLS BOULEVARD
LAKELAND, FL 338052225 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: CHANDLER RAPSON 06/11/2008
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: CD ( ) Delete
Name: LEVY, ODED
Address: 160 WEST 66TH STREET
City-St-Zip: NEW YORK, NY 10023 US

Title: D ( ) Delete
Name: HAUSER, JEFFREY
Address: 390 RABRO DRIVE
City-St-Zip: HAUPPAUGE, NY 11788 US

Title: DS ( ) Delete
Name: ANTEBI, GONEN M
Address: 3035 LAKELAND HILLS BOULEVARD
City-St-Zip: LAKELAND, FL 338052225 US

Title: D (X) Delete
Name: COHANPOUR, SCOTT
Address: 3035 LAKELAND HILLS BOULEVARD
City-St-Zip: LAKELAND, FL 338052225 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change ( ) Addition
Name: RAPSON, CHANDLER
Address: 3035 LAKELAND HILLS BLVD
City-St-Zip: LAKELAND, FL 33805 US

Title: S (X) Change ( ) Addition
Name: FULTON, BARI
Address: 3035 LAKELAND HILLS BOULEVARD
City-St-Zip: LAKELAND, FL 338052225 US

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

SIGNATURE: BARI FULTON S 06/11/2008
Electronic Signature of Signing Officer or Director Date