## **2008 FOR PROFIT CORPORATION** ANNUAL REPORT

## Apr 23, 2008 8:00 am Secretary of State **DOCUMENT # P02000123042** 04-23-2008 90040 033 \*\*\*150.00 IBIS MANAGEMENT SERVICES, INC. Principal Place of Business Mailing Address 9055 IBIS BLVD. 9055 IBIS BOULEVARD WEST PALM BEACH, FL 33412 WEST PALM BEACH, FL 33412 US 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04012008 Chg-P CR2E034 (12/06) Applied For 4. FEI Number City & State City & State Not Applicable 11-3662755 Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent SPEER, GEORGE Street Address (P.O. Box Number is Not Acceptable) 9055 IBIS BOULEVARD WEST PALM BEACH, FL 33412 Zip Code FL 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. Addition Detete TITLE ☐ Change TITLE Lobludice, Steve TYRRELL, STUART NAME NAME goss lois Blud. STREET ADDRESS STREET ADDRESS 8225 IBIS BLVD West Palm Beach, FL 33412 CITY-ST-7IP WEST PALM BEACH, FL 33412 CITY-ST-ZIP VΡ Change Addition TITLE ☐ Delete TITLE SPEER, GEORGE G NAME NAME STREET ADDRESS 9055 IBIS BLVD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP WEST PALM BEACH, FL 33412 Change ☐ Addition TITLE ☐ Delete VANDER MAY, WILLIAM R NAME STREET ADDRESS STREET ADDRESS **8225 IBIS BLVD** CITY-ST-ZIP CITY-ST-ZIP WEST PALM BEACH, FL 33412 ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition Delete ☐ Change MARAE STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. 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 or supplemental report is true and accurate and that my 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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

GEORGE SPÉER, VICE PRESIDENT

ED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

FILED

Daylime Phone #