2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 17, 2008 08:00 A
Secretary of State

DOCUMENT # P06000002195

1. Entity Name
FM FED, INC.

Principal Place of Business	Mailing Address
C/O JOEL D. FEDDER 3590 MISTLETOE LN LONGBOAT KEY, FL 34228	C/O JOEL D. FEDDER 3590 MISTLETOE LN LONGBOAT KEY, FL 34228

DO NOT WRITE IN THIS SPACE

01002000 No Chg-P CR2E034 (11/05)

4. FEI Number
14-1949946
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S PINE ISLAND RD
PLANTATION, FL 33324

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable — NOTE: Registered Agent signature required when changing

FILE NOW!!! FEE IS $150.00
After May 1, 2008 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PDT
NAME	FEDDER, JOEL D
STREET ADDRESS	3590 MISTLETOE LANE
CITY-ST-ZIP	LONGBOAT KEY, FL 34228
TITLE	VAS
NAME	MILLER, DANIEL S
STREET ADDRESS	4808 PERGRINE PT CIRCLE WEST
CITY-ST-ZIP	SARASOTA, FL 34231
TITLE	VS
NAME	JODHAN, NICHOLAS
STREET ADDRESS	7349 FEATHERSTONE BLVD
CITY-ST-ZIP	SARASOTA, FL 34238
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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 trustee 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

SIGNATURE: Joel D Fedder 3/30/08 941-383-7988
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #