2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000093868

Entity Name: TEAM BURKE, INC.

FILED Feb 20, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

13925 SAWPIT ROAD
JACKSONVILLE, FL 32226

13927 SAWPIT ROAD
JACKSONVILLE, FL 32226

JACKSONVILLE, FL 32226

Current Mailing Address: New Mailing Address:

13925 SAWPIT ROAD
JACKSONVILLE, FL 32226

13927 SAWPIT ROAD
JACKSONVILLE, FL 32226

JACKSONVILLE, FL 32226

FEI Number: 26-0776989 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:

DARRELL, CHARLES BURKE, CHARLES D
13925 SAWPIT ROAD
13927 SAWPIT ROAD
JACKSONVILLE, FL 32226 US
JACKSONVILLE, FL 32226 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: CHARLES D BURKE 02/20/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 PVPS
 () Delete
 Title:
 PVPS
 (X) Change () Addition

 Name:
 BURKE, CHARLES D
 Name:
 BURKE, CHARLES D

 Address:
 13925 SAWPIT ROAD
 Address:
 13927 SAWPIT ROAD

City-St-Zip: JACKSONVILLE, FL 32226 City-St-Zip: JACKSONVILLE, FL 32226

Title: TD () Delete Title: TD (X) Change () Addition Name: BURKE, CHARLES D Name: BURKE, CHARLES D

Address: 13925 SAWPIT ROAD Address: 13927 SAWPIT ROAD

City-St-Zip: JACKSONVILLE, FL 32226 City-St-Zip: JACKSONVILLE, FL 32226

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

Name:BURKE, CHRISTOPHER DName:BURKE, CHRISTOPHER DAddress:13925 SAWPIT ROADAddress:13927 SAWPIT ROADCity-St-Zip:JACKSONVILLE, FL 32226City-St-Zip:JACKSONVILLE, FL 32226

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: CHARLES D BURKE MR. 02/20/2008