

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000073925

Entity Name: FMS EVALUATIONS, INC.

FILED
Apr 28, 2009
Secretary of State

Current Principal Place of Business:

1700 NW 66TH AVENUE, SUITE 101
PLANTATION, FL 33313

New Principal Place of Business:

Current Mailing Address:

1700 NW 66TH AVENUE, SUITE 101
PLANTATION, FL 33313

New Mailing Address:

FEI Number: 26-3124133

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KAPLAN, SUSAN
1551 NORTH FLAGLER DRIVE, UNIT 1217
WEST PALM BEACH, FL 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES () Change (X) Addition
Name: PRINCIPATO, LISA D
Address: 30 BOGUS HILL ROAD
City-St-Zip: NEW FAIRFIELD, CT 06812

Title: SECR () Change (X) Addition
Name: KAPLAN, SUSAN
Address: 1551 NORTH FLAGLER DRIVE, UNIT 1217
City-St-Zip: WEST PALM BEACH, FL 33401

Title: DIR () Change (X) Addition
Name: PRINCIPATO, LISA D
Address: 30 BOGUS HILL ROAD
City-St-Zip: NEW FAIRFIELD, CT 06812

Title: DIR () Change (X) Addition
Name: KAPLAN, SUSAN
Address: 1551 NORTH FLAGLER DRIVE, UNIT 1217
City-St-Zip: WEST PALM BEACH, FL 33401

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: SUSAN KAPLAN

SECR

04/28/2009

Electronic Signature of Signing Officer or Director

_____ Date