

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P39716

FILED
Sep 10, 2008
Secretary of State

Entity Name: BEACON INVESTMENT SERVICES, INC.

Current Principal Place of Business:

13104 MEADOW BREEZE DR.
WELLINGTON, FL 33414

New Principal Place of Business:

Current Mailing Address:

13104 MEADOW BREEZE DR.
WELLINGTON, FL 33414

New Mailing Address:

FEI Number: 75-2423603

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MADES, HOWARD
13104 MEADOW BREEZE DRIVE
WELLINGTON, FL 33414 US

Name and Address of New Registered Agent:

MADES, JANE
13104 MEADOW BREEZE DRIVE
WELLINGTON, FL 33414 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: JANE MADES

09/10/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: MADES, HOWARD,
Address: 13104 MEADOW BREEZE DRIVE
City-St-Zip: WELLINGTON, FL 33414

Title: D () Delete
Name: MADES, MICHELLE
Address: 16000 BENT TREE FOREST CIR SUITE 624
City-St-Zip: DALLAS, TX 75248

Title: PS () Delete
Name: MADES, JANE
Address: 13104 MEADOW BREEZE DRIVE
City-St-Zip: WELLINGTON, FL 33414

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: MADES, JANE
Address: 13104 MEADOW BREEZE DRIVE
City-St-Zip: WELLINGTON, FL 33414

Title: D (X) Change () Addition
Name: MADES, JANE
Address: 13104 MEADOW BREEZE DRIVE
City-St-Zip: WELLINGTON, FL 33414

Title: S (X) Change () Addition
Name: MADES, JANE
Address: 13104 MEADOW BREEZE DRIVE
City-St-Zip: WELLINGTON, FL 33414

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: JANE MADES

P

09/10/2008

Electronic Signature of Signing Officer or Director

Date