

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000080440

FILED  
Mar 07, 2008  
Secretary of State

Entity Name: RESOURCE ACQUISITION & MANAGEMENT SERVICES, INC.

## Current Principal Place of Business:

12902 COMMODITY PLACE  
TAMPA, FL 33626 US

## New Principal Place of Business:

## Current Mailing Address:

12902 COMMODITY PLACE  
TAMPA, FL 33626 US

## New Mailing Address:

FEI Number: 59-3276048      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

F&R CORP  
200 LAURA STREET  
JACKSONVILLE, FL 32202 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: DP ( ) Delete  
Name: MATHEWS, H J  
Address: 16430 TURNBURY OAK DR  
City-St-Zip: ODESSA, FL 33556

Title: DVS ( ) Delete  
Name: MATHEWS, MICHELE C  
Address: 12902 COMMODITY PLACE  
City-St-Zip: TAMPA, FL 33626

Title: VD ( ) Delete  
Name: REDWINE, GARY S  
Address: 16508 TURNBURY OAK DRIVE  
City-St-Zip: ODESSA, FL 33556

Title: D ( ) Delete  
Name: REDWINE, STEVE  
Address: 230 DAVID AVE.  
City-St-Zip: LEHIGH ACRES, FL 33972

Title: CFOT ( ) Delete  
Name: KASHMANIAN, MARK P  
Address: 12902 COMMODITY PLACE  
City-St-Zip: TAMPA, FL 33626

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: MARK P. KASHMANIAN

CFO

03/07/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date