2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Apr 14, 2008
Secretary of State

DOCUMENT# P94000080440

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:

F & L CORP.
ONE INDEPENDENT DRIVE
SUITE 1300
JACKSONVILLE, FL 32202 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: BY:CHARLES V HEDRICK AUTHORIZED SIGNATORY 04/14/2008
Electronic Signature of Registered Agent Date

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: H. J. MATHEWS P 04/14/2008
Electronic Signature of Signing Officer or Director Date