


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 11, 2006 08:00 AM
Secretary of State

DOCUMENT # F05000003262
1. Entity Name
CURTIS JAMES MANAGEMENT SERVICES, INC.



Principal Place of Business Mailing Address
741 CENTERVIEW BLVD. **741 CENTERVIEW BLVD.**
CRESTVIEW HILLS, KY 41017 **CRESTVIEW HILLS, KY 41017**



03262006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number Applied For
61-1211330 Not Applicable

5. Certificate of Status Desired **\$6.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE: PT
NAME: SMITH, W. CURTIS
STREET ADDRESS: 112 WATCH HILL LANE
CITY-ST-ZIP: NEWPORT, KY 41071

TITLE: EV
NAME: BORKE, JAMES P
STREET ADDRESS: 505 N. LAKESHORE DRIVE
CITY-ST-ZIP: CHICAGO, IL 60611

TITLE: AS
NAME: WERDEN, GEORGE W
STREET ADDRESS: 741 CENTERVIEW BLVD
CITY-ST-ZIP: CRESTVIEW HILLS, KY 41017

TITLE: _____
NAME: _____
STREET ADDRESS: _____
CITY-ST-ZIP: _____

TITLE: _____
NAME: _____
STREET ADDRESS: _____
CITY-ST-ZIP: _____

TITLE: _____
NAME: _____
STREET ADDRESS: _____
CITY-ST-ZIP: _____

DO NOT WRITE IN THIS SPACE

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04/25/06-00089-016 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: George W. Warden Asst Sec 4/6/06 859-331-3900

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #