

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 02, 2006 8:00 am
Secretary of State

05-02-2006 90221 020 ***150.00

DOCUMENT # F97000003648

1. Entity Name
RIMKUS CONSULTING GROUP, INC.



Principal Place of Business
EIGHT GREENWAY PLAZA, SUITE 500
HOUSTON, TX 77046

Mailing Address
EIGHT GREENWAY PLAZA, SUITE 500
HOUSTON, TX 77046

60033307



04252006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 76-0163936	Applied For Not Applicable
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5. Certificate of Status Desired ☐ **\$8.75** 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 _____

Signature, typed or printed name of registered agent and title if applicable.

(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 NAME STREET ADDRESS CITY-ST-ZIP	CEOD CULBERSON, S.F. 29 FOXHALL CRESCENT SUGAR LAND, TX 77479
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	COOD MARKHAM, G W 9202 MARKHAM RD MANVEL, TX 77578
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD GRAHAM, R.S. 10010 BRIAR DR HOUSTON, TX 77042
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD BROWN, CURTIS 13503 GAINESWAY CYPRESS, TX 77429
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	CFO Jerry Johnson 8 Greenway Houston, TX 77046
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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**DO NOT WRITE
IN THIS SPACE**

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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-26-06

Date

713-621-3550

Daytime Phone #