


2006 FOR PROFIT CORPORATION
ANNUAL REPORT

FILED
Mar 06, 2006 8:00 am
Secretary of State

03-06-2006 90026 007 ***150.00

DOCUMENT # P04000003297		
1. Entity Name FIRST SOURCE MANAGEMENT, INC.		
Principal Place of Business 1903 SOUTH CONGRESS AVENUE SUITE 160 BOYNTON BEACH, FL 33426	Mailing Address 1903 SOUTH CONGRESS AVENUE SUITE 160 BOYNTON BEACH, FL 33426	

40025247



First Source Management, Inc
3200 N. Federal Hwy., #121
Boca Raton, Florida 33431

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Boca Raton, Florida 33431

01092006 Chg-P CR2E034 (11/05)

4. FEI Number 58-2603294		Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent CASCIO, CARL A ESQ. % CARL A. CASCIO, P.A. 525 N.E. 3RD AVENUE, SUITE 102 DELRAY BEACH, FL 33444		
7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City, FL Zip Code		
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>		

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

9. Election Campaign Financing **\$5.00** May Be
Trust Fund Contributor

10. OFFICERS AND DIRECTORS		11. D AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LUCIANI, JOHN W III 1903 SOUTH CONGRESS AVE. SUITE 160 BOYNTON BEACH, FL 33426 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LUCIANI, JOHN W III 3200 N. FEDERAL HWY #121 BOCA RATON, FL 33431 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LUCIANI, DORIAN E 1903 SOUTH CONGRESS AVE. SUITE 160 BOYNTON BEACH, FL 33426 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LUCIANI, DORIAN E 3200 N. FEDERAL HWY #121 BOCA RATON, FL 33431 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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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

JOHN LUCIANI

Date

Daytime Phone #

561-544-1801