


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

Feb 26, 2007 08:00 AM
Secretary of State

DOCUMENT # F02000003912 1. Entity Name INTEGRATED COURTROOM TECHNOLOGY, INC.	
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Principal Place of Business 831 CARSWELL AVE. HOLLY HILL, FL 32117	Mailing Address 831 CARSWELL AVE. HOLLY HILL, FL 32117
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02162007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 01-0699952	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

MARKETTE, FRANCIS N 4445 S. ATLANTIC AVE., 706 PONCE INLET, FL 32127

**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)

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
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03/07/07-80066-025 150.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	C WOODS, WINTON 1610 N SAWTELLE AVE. TUCSON, AZ 85716
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P MARKETTE, FRANCIS N 4445 S ATLANTIC AVE., #706 PONCE INLET, FL 32127
TITLE NAME STREET ADDRESS CITY - ST - ZIP	ST NESS, LEONARD 4411 N VIA SINUOSA TUCSON, AZ 85745
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**

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: Len Ness 2/16/07 (520) 745-0001
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #