2007 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT # F06000003449 -

CRIMINAL JUSTICE INSTITUTE, INC.



FILED Feb 09, 2007 08:00 A Secretary of State

Principal Place of Business

213 COURT STREET SUITE 606

MIDDLETOWN, CT 06457

Mailing Address

213 COURT STREET SUITE 606 MIDDLETOWN, CT 06457



DO NOT WRITE IN THIS SPACE

01082007 No Chg-NP

CR2E037 (4/06)

13-2926247

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MICKEY, WENDY C/O HDR ARCHITECTURE, INC. 2202 NORTH WESTSHORE BLVD SUITE 250 TAMPA, FL 33607

DO NOT WRITE IN THIS SPACE

				<u> 2. 1778 (n. 1754)</u>		Water State State B	
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.							
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SIGNATURE			d Agent signature	Agent signature required when reinstating) DATE			—
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	Filing Fee is \$61.25	"9." Election Campaign Finan	icing	\$5.00 May Be			
	Due by May 1, 2007	Trust Fund Contribution.	Ц	Added to Fees			
10. OFFICERS AND DIRECTORS			vas it likus i				773
TITLE	С						
NAME	GRIFFIN, GARY						
STREET ADDRESS CITY-ST-ZIP	103 OAKDALE AVE				<u> </u>	410	
	GREER, SC 29651 PT				'02/20/07-800	06-010-70.00	
TITLE NAME	CAMP, GEORGE M						
STREET ADDRESS	,						
CITY-ST-ZIP	MIDDLETOWN, CT 06457			P. 可可用的一个			•;
TITLE	PS				A REAL PROPERTY.		y
NAME	CAMP, CAMILLE G						
STREET ADDRESS CITY-ST-ZIP	1200 WASHINGTON ST			DO	NOT WI	RITE	
TITLE	MIDDLETOWN, CT 06457				W 18	ing the state of t	
NAME			25.5		THIS SPA	ACE	
STREET ADDRESS			2 1 20 18		XXXXXXXXXXXX		
CITY-ST-ZIP							
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-TITLE	- '.	<u> </u>					
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CITY-ST-ZIP							* .
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I hereby certify that the information supplied with this filling does not quality for the exemptions contained in Chapter 119, Florida Statutes. I write a certification 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 at trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with address, with all other like empowered. changed, or on an attachment y

SIGNATURE:

E OF SIGNING OFFICER OR DIRECTOR SIGNATURE AND TYPED OR PRINTED NA