

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 12, 2006 8:00 am
Secretary of State

01-12-2006 90191 011 ***150.00

DOCUMENT # F97000001222

1. Entity Name
F.A.C.T.S. MANAGEMENT CO.



Principal Place of Business
100 NORTH 56TH STREET
STE 306
LINCOLN, NE 68504 US

Mailing Address
5555 SOUTH STREET
2ND FLOOR
LINCOLN, NE 68506 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01062006 Chg-P CR2E034 (11/05)

4. FEI Number
47-0751402

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ALTICE, WILLIAM J.
1309 EAST WALLACE STREET
ORLANDO, FL 32809

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

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME PD
STREET ADDRESS BYRNES, DAVID
CITY-ST-ZIP 100 NORTH 56TH STREET, STE 306
LINCOLN, NE 68504 ☐ Delete

TITLE
NAME VP/D
STREET ADDRESS Timothy A. Tewes
CITY-ST-ZIP 100 North 56th Street, Suite 306
Lincoln, NE 68504 ☐ Change ☒ Addition

TITLE
NAME VSD
STREET ADDRESS PHILLIPS, STANLEY
CITY-ST-ZIP 100 NORTH 56TH STREET, STE 306
LINCOLN, NE 68504 ☒ Delete

TITLE
NAME S
STREET ADDRESS Ed Martinez
CITY-ST-ZIP 121 South 13th Street, Suite 201
Lincoln, NE 68508 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME T/D
STREET ADDRESS Terry Heimes
CITY-ST-ZIP 121 South 13th Street, Suite 201
Lincoln, NE 68508 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME D
STREET ADDRESS Michael Dunlap
CITY-ST-ZIP 121 South 13th Street, Suite 201
Lincoln, NE 68508 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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

Date

Daytime Phone #

1/8/06

(402) 483-7172