

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000007873

FILED  
Apr 25, 2005  
Secretary of State

**Entity Name:** LICE SOLUTIONS RESOURCE NETWORK, INCORPORATED

**Current Principal Place of Business:**

4463 WESTROADS DR  
WEST PALM BEACH, FL 33458

**New Principal Place of Business:**

**Current Mailing Address:**

4463 WESTROADS DR  
WEST PALM BEACH, FL 33458

**New Mailing Address:**

**FEI Number:** 65-1152691

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

GILMORE, CHAD  
3597 AIRPORT ROAD  
PAHOKEE, FL 33476 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: HOLM, TARA  
Address: 4318 BIRDWOOD ST  
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: TD ( ) Delete  
Name: GILMORE, CHAD  
Address: 3597 AIRPORT RD  
City-St-Zip: PAHOKEE, FL 33476

Title: SD ( ) Delete  
Name: BECKSTROM, RONALD L  
Address: 247 BROOKVIEW DR  
City-St-Zip: VALDOSTA, GA 31602

Title: ED ( ) Delete  
Name: SHEPARD, KATIE  
Address: 6210 FOSTER ST  
City-St-Zip: JUPITER, FL 33458

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ED (X) Change ( ) Addition  
Name: SHEPHERD, KATIE  
Address: 6210 FOSTER ST  
City-St-Zip: JUPITER, FL 33458

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KATIE SHEPHERD

ED

04/25/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date