

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000004689

FILED
Mar 16, 2006
Secretary of State

Entity Name: CROSS-DISABILITY TRANSPORTATION ISSUES COMMITTEE, INC.

Current Principal Place of Business:

5555 BISCAYNE BLVD
2ND FLOOR
MIAMI, FL 33137 US

New Principal Place of Business:

Current Mailing Address:

5555 BISCAYNE BLVD
2ND FLOOR
MIAMI, FL 33137 US

New Mailing Address:

FEI Number: 37-1434255 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

MARCO, M. RAY
11211 SW 102 AVE.
MIAMI, FL 33176 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: D () Delete
Name: MCNALLY, ELIZABETH
Address: 1398 NE 182 ST.
City-St-Zip: N. MIAMI BEACH, FL 33162 US

Title: VP () Delete
Name: CHURCH, THOMAS
Address: 350 TOTOLOCHEE DRIVE
City-St-Zip: HIALEAH, FL 33010 US

Title: P () Delete
Name: MCNALLY, ELIZABETH
Address: 1960 NE 185 TERR
City-St-Zip: N. MIAMI BCH, FL 33179 US

Title: T () Delete
Name: GREGORY, DAMIAN
Address: 11342 SW 163 ST.
City-St-Zip: MIAMI, FL 33157 US

Title: MD () Delete
Name: KIMBLE, ANN
Address: 1398 NE 182 ST
City-St-Zip: NO. MIAMI BCH, FL 33162 US

Title: D () Delete
Name: LIBMAN, LAWRENCE
Address: 280 SIERRA DRIVE
City-St-Zip: MIAMI, FL 33179 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: VALKEMA, DENISE
Address: 14919 SW 90 TERRACE
City-St-Zip: MIAMI, FL 33196 US

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

Title: T (X) Change () Addition
Name: MARKS, GRACE
Address: 11355 SW 84 ST 3411
City-St-Zip: MIAMI, FL 33173 US

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

Title: D (X) Change () Addition
Name: LARRY, LAWRENCE
Address: 280 SIERRA DRIVE
City-St-Zip: MIAMI, FL 33179 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: ANN T. KIMBLE

MD

03/16/2006

Electronic Signature of Signing Officer or Director

Date