


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2006 8:00 am
Secretary of State

04-26-2006 90196 019 ****61.25

DOCUMENT # N05000002674 1. Entity Name LBTS CITIZENS INITIATIVE COMMITTEE, INC.					
Principal Place of Business 222 N TRADEWINDS AVE LAUDERDALE BY THE SEA, FL 33308			Mailing Address 222 N TRADEWINDS AVE LAUDERDALE BY THE SEA, FL 33308		
2. Principal Place of Business 254 MIRAMAR AVENUE Suite, Apt. #, etc.		3. Mailing Address 254 MIRAMAR AVENUE Suite, Apt. #, etc.			
City & State LAUDERDALE BY THE SEA, FL Zip 33308-5005		City & State LAUDERDALE BY THE SEA, FL Zip 33308-5005		4. FEI Number 56-240155Z Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		04242006 Chg-NP CR2E037 (11/05)			
6. Name and Address of Current Registered Agent THOMSON, JOHN B 4000 N OCEAN BLVD APT 1016 LAUDERDALE BY THE SEA, FL 33308			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 671 LAKESIDE CIRCLE APT. 306 City POMPANO BEACH FL Zip Code 33060		
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 <i>J.B. Thompson</i> JOHN B. THOMPSON, DIRECTOR, ASST TREASURER, 4/24/2006 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DC COURIEL, JOSEPH A 222 N TRADEWINDS AVE LAUDERDALE BY THE SEA, FL 33308 <input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DVC MCINTEE, JEROME S 1612 SE 21ST AVE LAUDERDALE BY THE SEA, FL 33062 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	DC MCINTEE, JEROME S 1621 S.E. 21ST STREET LAUDERDALE BY THE SEA, FL 33062-7639 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DS MCCAUSLAND, GRETEL M 251 OCEANIC AVE LAUDERDALE BY THE SEA, FL 33308 <input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	DS EVANS, GEOFFREY 1941 S.E. 18TH STREET LAUDERDALE BY THE SEA, FL 33062-7621 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DT CARR, THOMAS W 254 MIRAMAR AVE LAUDERDALE BY THE SEA, FL 33308 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DAT THOMPSON, JOHN B 4000 N OCEAN BLVD APT 1016 LAUDERDALE BY THE SEA, FL 33308 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	DAT THOMPSON, JOHN B 671 LAKESIDE CIRCLE, APT. 306 POMPANO BEACH, FL 33060-3713 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	DVC ROBERTS, ROLAND W. 220 IMPERIAL LANE LAUDERDALE BY THE SEA, FL 33308-5925 <input type="checkbox"/> Change <input checked="" type="checkbox"/> 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 617, 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: <i>J.B. Thompson</i> JOHN B. THOMPSON, DAT, 4/24/2006 {215-962-3575 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					