

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMENT # N21373 1. Entity Name CBMC INTERNATIONAL, INC.			
Principal Place of Business 1065 NORTH 115TH STREET, #210 OMAHA NE 68154		Mailing Address 1065 NORTH 115TH STREET, #210 OMAHA NE 68154	
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 58-1744271		5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent STINZIANO, JOHN L 5551 RIDGEWOOD DRIVE STE. 555 NAPLES, FL 34108		7. Name and Address of New Registered Agent 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 not a notary public (NOTE: Registered Agent signature is required when renewing)			
FILE NOW: FEE IS \$61.25 Due By May 1, 2006		9. Election Campaign Financing Trust Fund Contribution ☐ \$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 R T NAME MILLER, CHARLES STREET ADDRESS 1008 E. JACKSON BLVD. CITY-STATE-ZIP ELKHART IN 46516	☐ Delete	TITLE C NAME Jim Johnston STREET ADDRESS 29 Purdyburn Hill CITY-STATE-ZIP Belfast BT8 8JY N. Ireland	☐ Change ☒ Addition
TITLE R D NAME GARRISON, STEPHEN STREET ADDRESS 13421 MT. HOOD DRIVE CITY-STATE-ZIP SANTA ANA CA 92705	☐ Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP 	☐ Change ☐ Addition
TITLE S NAME HWANG, SAM STREET ADDRESS 1325 SPRUCE STREET CITY-STATE-ZIP PHILADELPHIA PA 19107	☐ Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP 	☐ Change ☐ Addition
TITLE R D NAME MITCHELL, DON STREET ADDRESS 2750 LONG WINTER LAKE CITY-STATE-ZIP OAKLAND TOWNSHIP MI 48636	☐ Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP 	☐ Change ☐ Addition
TITLE D NAME KNOBLAUCH, JOERG D STREET ADDRESS HAHNLESTRASSE 24 CITY-STATE-ZIP 89537 GIENGEN GE	☒ Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP 	☐ Change ☐ Addition
TITLE P NAME MILLIGAN, ROBERT STREET ADDRESS 1065 N. 115TH ST., STE 210 CITY-STATE-ZIP OMAHA NE 68154	☐ Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP 	☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: <u>Charles Miller</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date: <u>09/10/2006</u> Date	

FILED

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**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

8/28/06 MOORE CR2E037 (10/05) 004 \$61.25

Charles Miller