

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000034410

FILED  
May 08, 2006  
Secretary of State

**Entity Name:** FLORIDA COMMUNICATIONS CONSULTANTS, INC.

**Current Principal Place of Business:**

378 CENTERPOINTE CIRCLE  
1212  
ALTAMONTE SPRINGS, FL 32701

**New Principal Place of Business:**

**Current Mailing Address:**

378 CENTERPOINTE CIRCLE  
1212  
ALTAMONTE SPRINGS, FL 32701

**New Mailing Address:**

**FEI Number:** 01-0650156

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KLECKNER, GREG  
200 S SOMERSET CT  
SANFORD, FL 32773 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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: KHAN, INSAF  
Address: 767 REDCOACH AVE  
City-St-Zip: DELTONA, FL 32725

Title: V ( ) Delete  
Name: KLECKNER, GREG  
Address: 200 S SOMERSET CT  
City-St-Zip: SANFORD, FL 32773

Title: V (X) Delete  
Name: CHIN, JASON  
Address: 26 SILVERBROOKE CIR  
City-St-Zip: HOWELL, FL 07731

Title: S ( ) Delete  
Name: KHAN, AIZAN  
Address: 673 SANDY NECK LANE  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

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

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** INSAF D. KHAN

P

05/08/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date