

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 11, 2008 08:00 AM
Secretary of State

DOCUMENT # P04000003297

1. Entity Name
FIRST SOURCE MANAGEMENT, INC.



Principal Place of Business
**FIRST SOURCE MANAGEMENT, INC.
3200 N FEDERAL HWY #121
BOCA RATON, FL 33431**

Mailing Address
**FIRST SOURCE MANAGEMENT, INC.
3200 N FEDERAL HWY #121
BOCA RATON, FL 33431**



01072008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
58-2603294

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**CASCIO, CARL A ESQ.
% CARL A. CASCIO, P.A.
525 N.E. 3RD AVENUE, SUITE 102
DELRAY BEACH, FL 33444**

**DO NOT WRITE
IN THIS SPACE**

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 title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	LUCIANI, JOHN W III
STREET ADDRESS	3200 N FEDERAL HWY #121
CITY - ST - ZIP	BOCA RATON, FL 33431
TITLE	D
NAME	LUCIANI, DORIAN E
STREET ADDRESS	3200 N FEDERAL HWY # 121
CITY - ST - ZIP	BOCA RATON, FL 33431
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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01/11/08-80031-010 150.00

**DO NOT WRITE
IN THIS SPACE**

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 607, 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:

John W. Luciani III 1/8/08 (561)-5448801
C.E.O.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #