## 2008 FOR PROFIT CORPORATION **ANNUAL REPORT**

## Jan 24, 2008 08:00 Al Secretary of State DOCUMENT # P96000047553 1. Entity Name LITIGATION CONSULTING, INC. Principal Place of Business Mailing Address 4706 MULLEN ROAD **4706 MULLEN ROAD** NEW BERN, NC 28560 NEW BERN, NC 28560 01212008 No Chq-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0667702 Not Applicable \$8.75 Additional 5. Certificate of Status Desired $\Box$ Fee Required 6. Name and Address of Current Registered Agent DOBIN, MARC S ESQ DO NOT WRITE 120 INTRACOASTAL POINTE DRIVE **SUITE #100** IN THIS SPACE JUPITER, FL 33477 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 (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2008 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS THTLE" COLLISON, CHRISTINA S NAME STREET ADDRESS 4706 MULLEN ROAD CITY-ST-ZIP NEW BERN, NC 28560 TITLE 000000795418 NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-7tP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

2*52-6*36-3580

FILED