

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000036661

FILED
Jan 05, 2007
Secretary of State

Entity Name: SPECIALIZED CIVILIAN RESPONSE TEAM, INC.

Current Principal Place of Business:

4317 NEPTUNE ST.
TAMPA, FL 33617

New Principal Place of Business:

Current Mailing Address:

PO BOX 18034
TAMPA, FL 33679

New Mailing Address:

FEI Number: 59-3570776

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HUMPHRIES, J. BOB
501 E. KENNEDY BLVD., STE. 1700
TAMPA, FL 33602 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: D () Delete
Name: MOON, RALPH E PH.D
Address: 4317 NEPTUNE ST.
City-St-Zip: TAMPA, FL 33617

Title: D () Delete
Name: FLY, RONALD E
Address: 901 S. FRANKLAND RD.
City-St-Zip: TAMPA, FL 33629

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: RONALD E. FLY

D

01/05/2007

Electronic Signature of Signing Officer or Director

Date