

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S48512

FILED
Jan 08, 2007
Secretary of State

Entity Name: ORGANIZATIONAL CONSULTANTS, INC.

Current Principal Place of Business:

2101 W COMMERCIAL BLVD
STE 2000
FT LAUDERDALE, FL 33309

New Principal Place of Business:

Current Mailing Address:

2101 W COMMERCIAL BLVD
STE 2000
FT LAUDERDALE, FL 33309

New Mailing Address:

FEI Number: 65-0257614 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MICHAEL E GREENE
NEIMARK, GREENE & NADEL P A
9900 W SAMPLE RD STE 324
CORAL GABLES, FL 33065 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: DTS () Delete
Name: SHEA, MAUREEN,
Address: 2101 W COMMERCIAL BLVD, STE 2000
City-St-Zip: FT LAUDERDALE, FL 33309

Title: DP () Delete
Name: SHEA, THOMAS H.,
Address: 2101 W COMMERCIAL BLVD, STE 2000
City-St-Zip: FT. LAUDERDALE, FL 33309

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: MAUREEN A. SHEA

DTS

01/08/2007

Electronic Signature of Signing Officer or Director

Date