

STATE OF FLORIDA
COMMISSION ON ETHICS
P. O. DRAWER 15709, TALLAHASSEE, FLORIDA 32317-5709

COMPLAINT

COMMISSION ON ETHICS
DATE RECEIVED

MAR 15 2006

1. PERSON BRINGING COMPLAINT:

Name: Lancelot U. Armstrong, Telephone Number:

Address: #.500408148, 7-D-16, P.O. Box 9356,

City: Fort Lauderdale, County: Broward, Fla. Zip Code: 33310

2. PERSON AGAINST WHOM COMPLAINT IS BROUGHT:

(Current or former public officer, public employee, candidate, or lobbyist) (Please use one complaint form for each person you wish to complain against):

Name: State Atty. Michael J. Satz, Telephone Number: (954) 831-5893,

Address: 201 S.E. 6th Street, Suite 665,

City: Fort Lauderdale, County: Broward, Florida. Zip Code: 33301

Title of office or position held or sought: Broward County, State Attorney,

3. STATEMENT OF FACTS: See: exhibit Attachment -

Please explain your complaint fully, either on the reverse side of this form or on additional sheets, providing a detailed description of the facts and the actions of the person named above. Include relevant dates and the names and addresses of persons whom you believe may be witnesses. If you believe that a particular provision of Article II, Section 8, Florida Constitution (the Sunshine Amendment) or of Part III, Chapter 112, Florida Statutes (the Code of Ethics for Public Officers and Employees) has been violated, please state the specific section(s). Please do not attach copies of lengthy documents; if they are relevant, your description of them will suffice. Also, please do not submit video tapes or audio tapes.

4. OATH:

STATE OF FLORIDA
COUNTY OF Broward

I, the person bringing this complaint, do depose on oath or affirmation and say that the facts set forth in the foregoing complaint and attachments thereto are true and correct to the best of my knowledge and belief.

Sworn to (or affirmed) and subscribed before me this 9th day of March, 2006, by Lancelot U. Armstrong
(name of person making statement)

Jeffery B. Johnson
(Signature of Notary Public - State of Florida)



Jeffery B. Johnson
MY COMMISSION # DD347632 EXPIRES
August 17, 2008
BONDED THROUGH TROY EARN INSURANCE, INC.

(Print, Type, or Stamp Commissioned Name of Notary Public)

Personally Known OR Produced Identification

 Type of Identification Produced:

John J. D.

Lancelot Armstrong #.500408148,
SIGNATURE OF COMPLAINANT

Commission on ethics
Complaint Attachment!

I Lancelot Armstrong, hereby complain about the conduct of Broward County, State Attorney Michael J. Satz. He has committed prosecutorial misconduct. Atty. M. J. Satz, hates me because I am a Black Jamaican. Atty. M. J. Satz has falsified evidence against me, in a first degree murder case. The falsification has placed me in great jeopardy of losing my life, because I am now on death row 16 years. I am on death row because Attorney Michael J. Satz has instructed the prosecutors and police, State's agency B.S.O. in my case to convict me at all costs. This belief in "conviction without evidence is unethical for a state attorney, and is conduct unbecoming a lawyer. It would be beneficial for Attorney Michael J. Satz to withdraw and his racial prejudice - against Jamaicans in my case I have been denied due process because of an elected official's misconduct. Please investigate state attorney Michael J. Satz, and his state's agency Broward Sheriff office, hostility toward Black and poor indigent defendants; particularly myself.

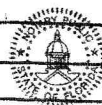
SEE: exhibit "The Florida Bar File no. 2006-51,003 (171) Also please find enclosed other material facts which exhibit may give you much better insight on contrary practice. Adria E. Quintela, Chief Branch Discipline Counsel, The Florida Bar referred me to you.

Respectfully Submitted:

Lancelot Armstrong,
Lancelot U. Armstrong, #. 500408148,
Affiant / pro-se

Jeffery B. Johnson

3/8/06



Jeffery B. Johnson
MY COMMISSION # DD347632 EXPIRES
August 17, 2008
BONDED THRU TROY FAIN INSURANCE, INC.