

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 733323

FILED  
Jan 03, 2008  
Secretary of State

Entity Name: CITIZEN'S CRIME WATCH OF MIAMI-DADE COUNTY, INC.

**Current Principal Place of Business:**

1515 N. W. 79TH AVENUE  
MIAMI, FL 33126

**New Principal Place of Business:**

1515 N. W. 79TH AVENUE  
DORAL, FL 33126

**Current Mailing Address:**

1515 N. W. 79TH AVENUE  
MIAMI, FL 33126

**New Mailing Address:**

1515 N. W. 79TH AVENUE  
DORAL, FL 33126

FEI Number: 59-1629766      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

JOHNSON, ELLEN  
1515 NW 79 AVENUE  
MIAMI, FL 33126    US

**Name and Address of New Registered Agent:**

JOHNSON, ELYN  
1515 NW 79 AVENUE  
DORAL, FL 33126    US

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: CARMEN CALDWELL      01/03/2008  
\_\_\_\_\_  
Electronic Signature of Registered Agent      Date

**OFFICERS AND DIRECTORS:**

Title: P      ( ) Delete  
Name: HELLER, IRVING  
Address: 4270 SW 106TH TERRACE  
City-St-Zip: DAVIE, FL 33328

Title: VP      ( ) Delete  
Name: PARKER, ROBERT  
Address: 9105 N.W. 25TH ST.  
City-St-Zip: MIAMI, FL 33172

Title: T      ( ) Delete  
Name: HARTE, SAMUEL  
Address: P.O. BOX 561775  
City-St-Zip: MIAMI, FL 332561775

Title: S      ( ) Delete  
Name: SULLIVAN, JACK  
Address: 1030 NW 111 AVE  
City-St-Zip: MIAMI, FL 33172

Title: ED      ( ) Delete  
Name: CALDWELL, CARMEN  
Address: 1515 NW 79TH AVE  
City-St-Zip: MIAMI, FL 33126

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CARMEN CALDWELL      ED      01/03/2008  
\_\_\_\_\_  
Electronic Signature of Signing Officer or Director      Date