2005 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Aug 19, 2005
Secretary of State

DOCUMENT# N33353

Entity Name: CITIZENS COMMISSION ON HUMAN RIGHTS OF FLORIDA, INC.

Current Principal Place of Business:

305 N FORT HARRISON AVE
CLEARWATER, FL 33755 US

New Principal Place of Business:

714 N FORT HARRISON AVE
CLEARWATER, FL 33755 US

Current Mailing Address:

305 N FORT HARRISON AVE
CLEARWATER, FL 33755 US

New Mailing Address:

714 N FORT HARRISON AVE
CLEARWATER, FL 33755 US

FEI Number: 59-2973520 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JOHNSON, PAUL B.
112 S. MAGNOLIA AVE
TAMPA, FL 33601 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

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: FIGUEROA, DAVID
Address: 3013 REGAL OAK BLVD
City-St-Zip: PALM HARBOR, FL 34684

Title: SD ( ) Delete
Name: BREEDEN, LINDA
Address: 1729 CYPRESS TRACE DR.
City-St-Zip: SAFETY HARBOR, FL 34695

Title: TD ( ) Delete
Name: KRAMER, KEN
Address: 15 TURNER ST #1
City-St-Zip: CLEARWATER, FL 33756

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: SD (X) Change ( ) Addition
Name: DUNN, HELYN
Address: 1108 S. MISSOURI AVE #205
City-St-Zip: CLEARWATER, FL 33756

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 Section 119.07(3)(i), 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: HELYN DUNN SD 08/19/2005

Electronic Signature of Signing Officer or Director — Date