2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000001759

CLEARWATER, FL 33760

FILED Apr 26, 2007 Secretary of State

Entity Name: PINELLAS COUNTY BAIL BOND ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

5560 ROOSEVELT BLVD. 14605 49TH ST. N.

UNIT 3 STE 4

CLEARWATER, FL 33760 CLEARWATER, FL 33762

Current Mailing Address: New Mailing Address:

14605 49TH ST. N. 5560 ROOSEVELT BLVD.

STE 4 UNIT 3

CLEARWATER, FL 33760 CLEARWATER, FL 33762

FEI Number: 59-3201706 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

STINES, JUDITH K KOPCZYNSKI, FRANK 5560 RÓOSEVELT BLVD 14605 49TH ST. N.

CLEARWATER, FL 33762 US UNIT 3 CLEARWATER, FL 33762 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.

City-St-Zip:

ST. PETERSBURG, FL 33711

SIGNATURE: FRANK KOPCZYNSKI 04/26/2007

Electronic Signature of Registered Agent Date

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

() Delete (X) Change () Addition

STINES, JUDITH K KYLE, WALTER Name: Name: 5560 ROOSEVELT BLVD Address: 600 34TH ST. NO Address:

City-St-Zip: Title: VD () Delete Title: VD (X) Change () Addition

DIXON, FREDDIE Name: KOCZYNSKI, FRANK Name: Address: 14835 49TH ST. N Address: 14605 49TH ST. N. UNIT 3

City-St-Zip: CLEARWATER, FL 33762 City-St-Zip: CLEARWATER, FL 33762

Title: () Delete Title: SD (X) Change () Addition WEBB, MERSHAWN TAMMY, CARMICHAEL Name: Name:

3350 ULMERTON RD. Address: 826 49TH ST. S Address: City-St-Zip: GULFPORT, FL City-St-Zip: CLEARWATER, FL 33762

Title: TD () Delete Title: TD (X) Change () Addition

Name: MORGAN, JANICE Name: ERIC, ESTES Address: 5560 ROOSEVELT BLVD Address: 13790 49TH ST. N. City-St-Zip: CLEARWATER, FL 33760 City-St-Zip: CLEARWATER, FL 33762

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: FRANK KOPCZYNSKI VP 04/26/2007