

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000003087

FILED
Jan 19, 2005
Secretary of State

Entity Name: CRIME STOPPERS OF NORTHEAST FLORIDA, INC.

Current Principal Place of Business:

420 N HALIFAX AVE.
#4B
DAYTONA BEACH, FL 32118

New Principal Place of Business:

Current Mailing Address:

P O BOX 15224
DAYTONA BEACH, FL 321155224

New Mailing Address:

FEI Number: 59-3395571

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DICESARE, JOHN
420 N HALIFAX AVE.
#4B
DAYTONA BEACH, FL 32118 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: S () Delete
Name: EMORY, COUNTS
Address: 301 S RIDGEWOD 230
City-St-Zip: DAYTONA BEACH, FL 321152457

Title: DP () Delete
Name: AZAMA-EDWARDS, GWEN
Address: 104 WATER TURKEY COURT
City-St-Zip: DAYTONA BEACH, FL 32119

Title: DV () Delete
Name: ULRICH, MICHAEL
Address: 2441 BELLEVUE
City-St-Zip: DAYTONA BEACH, FL 32114

Title: VD () Delete
Name: SACKS, DAVID
Address: 240 N. SEAGRAVE
City-St-Zip: DAYTONA BEACH, FL 32114

Title: DT () Delete
Name: PERRY, BRANDON
Address: 42 S PENINSULA DR.
City-St-Zip: DAYTONA BEACH, FL 32118

Title: MD () Delete
Name: DICESARE, JOHN
Address: 420 N HALIFAX AVE., #4B
City-St-Zip: DAYTONA BEACH, FL 32118

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: T (X) Change () Addition
Name: AZAMA-EDARDS, GWEN
Address: 104 WATER TURKEY COURT
City-St-Zip: DAYTONA BEACH, FL 32119

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

Title: DP (X) Change () Addition
Name: SACKS, DAVID
Address: 240 N. SEAGRAVE
City-St-Zip: DAYTONA BEACH, FL 32114

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 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: JOHN DICESARE

M

01/19/2005

Electronic Signature of Signing Officer or Director

Date