


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 06, 2006 08:00 AM
Secretary of State

DOCUMENT # N97000004577

1. Entity Name
 CIVILIAN VOLUNTEERS ASSISTING POLICE, INC.



Principal Place of Business
 411 N. FRANKLIN STREET
 TAMPA, FL 33602

Mailing Address
 411 N. FRANKLIN STREET
 TAMPA, FL 33602

DO NOT WRITE IN THIS SPACE



01252006 No Chg-NP CR2E037 (11/05)

4. FEI Number 31-1562135	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

WALKER, JOSEPH H
 411 N FRANKLIN ST
 TAMPA, FL 33602

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: *Joseph H. Walker* DA-DA-06
Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is \$61.25
Due by May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

U00000423442
 02/18/06-80008-005 61.25

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BERRY, JOAN 4202 BEACHWAY DRIVE TAMPA, FL 33609
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D APPLETON, ROBERT 3301 BAYSHORE BLVD #1804 TAMPA, FL 33629
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WICK, BETTY 3407 W. NEW ORLEANS AVE TAMPA, FL 33614
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D NOTO, DAISY A 3401 HEITER TAMPA, FL 33607
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HARRISON, DEBBIE 11131 WALTER HUNTER ROAD LITHIA, FL 33547
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WALKER, JOSEPH H 411 N FRANKLIN ST. TAMPA, FL 33602

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Daisy Noto* DAISY NOTO 2-2-06 2763432
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #