

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06000001955

**Entity Name:** COMMUNITY ISSUES COUNCIL, INC.

**FILED**  
**Apr 30, 2013**  
**Secretary of State**  
**CC4859074240**

**Current Principal Place of Business:**

3433 LITHIA PINECREST RD.  
SUITE 354  
VALRICO, FL 33596

**Current Mailing Address:**

3433 LITHIA PINECREST RD.  
SUITE 354  
VALRICO, FL 33596 US

**FEI Number: 20-4418981**

**Certificate of Status Desired: No**

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

KEMPLE, TERRENCE L  
3433 LITHIA PINECREST RD.  
SUITE 354  
VALRICO, FL 33596 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title PD  
Name KEMPLE, TERRENCE L  
Address 3433 LITHIA PINECREST RD., SUITE 354.  
City-State-Zip: VALRICO FL 33596

Title VD  
Name KEMPLE, SHIRLEY H  
Address 3433 LITHIA PINECREST RD., SUITE 354  
City-State-Zip: VALRICO FL 33596

Title D  
Name SPANO, ROSS  
Address 3433 LITHIA PINECREST RD., SUITE 354  
City-State-Zip: VALRICO FL 33596

Title D  
Name NELIS, MIKE  
Address 3433 LITHIA PINECREST RD., SUITE 354  
City-State-Zip: VALRICO FL 33596

Title D  
Name DIGERONIMO, THOMAS  
Address 3433 LITHIA PINECREST RD., SUITE 354  
City-State-Zip: VALRICO FL 33596

*I hereby 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 all other like empowered.*

**SIGNATURE: TERRENCE L KEMPLE**

**PRESIDENT**

**04/30/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date