

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000003087

Entity Name: CRIME STOPPERS OF NORTHEAST FLORIDA, INC.**Current Principal Place of Business:**555 W. GRANADA BOULEVARD
BUILDING A, SUITE 10
ORMOND BEACH, FL 32174**Current Mailing Address:**PO BOX 15224
DAYTONA BEACH, FL 32115**FEI Number:** 59-3395571**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**LENTZ, ALYSON D.
555 W. GRANADA BOULEVARD
BUILDING A, SUITE 10
ORMOND BEACH, FL 32174 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:** ALYSON D. LENTZ**04/28/2018**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	SECRETARY
Name	CROSBY, SABRINA
Address	PO BOX 15224
City-State-Zip:	DAYTONA BEACH FL 32115

Title	EXECUTIVE DIRECTOR
Name	LENTZ, ALYSON D.
Address	PO BOX 15224
City-State-Zip:	DAYTONA BEACH FL 32115

Title	PRESIDENT
Name	FULLER, EDWARD
Address	PO BOX 15224
City-State-Zip:	DAYTONA BEACH FL 32115

Title	TREASURER
Name	HARMAN, THOMAS
Address	PO BOX 15224
City-State-Zip:	DAYTONA BEACH FL 32115

Title	BOARD MEMBER
Name	JONES, MARK
Address	PO BOX 15224
City-State-Zip:	DAYTONA BEACH FL 32115

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: ALYSON LENTZ**EXECUTIVE DIRECTOR****04/28/2018**

Electronic Signature of Signing Officer/Director Detail

Date