2001 UNIFORM BUSINESS REPORT (UBR)

FILED Mar 05, 2001 8:00 am **DOCUMENT # 734538** Secretary of State 1. Entity Name 03-05-2001 90312 042 ****70.00 SAINT LUCIE COUNTY CRIME PREVENTION LEAGUE, INC. Principal Place of Business Mailing Address 4700 WEST MIDWAY ROAD 4700 WEST MIDWAY ROAD 144000 FORT PIERCE FL 34981 FORT PIERCE FL 34981 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 59-1692460 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Ken J. Mascara Street Address (P.O. Box Number is Not Acceptable) 4700 West Midway Road KNOWLES, ROBERT C. 4700 WEST MIDWAY ROAD FORT PIERCE FL 34981 Zip Code 34981 Fort Pierce. 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 Ken J. Mascara February 28, 2001 SIGNATURE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW: \$5.00 May Be Make Check Payable to Trust Fund Contribution. FEE IS \$61.25 Added to Fees Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. TITLE ☐ Change M Addition TITLE Delete KNOWLES, ROBERT C. Ken J. Masčara NAME NAME STREET ADDRESS 4700 WEST MIDWAY ROAD STREET ADDRESS 4700 E West Midway Road CITY-ST-ZIP CITY-ST-ZIE FORT PIERCE FL Fort Pierce, FL == 34981 TITLE ☐ Delete TITLE ☐ Change **Addition** TRIMM, DAVE NAME NAME Karen_Countryman, :4700 WEST-MIDWAY ROAD - 🗢 STREET ADDRESS STREET ADDRESS 4700 West Midway Road, Fort Pierce, FL 34981 CITY-ST-ZIE CITY~ST-7IP FORT PIERCE FL TITLE TITLE ☐ Change Addition LANGFORD, JOHN NAME NAME Dorothy Shaw 4700 W MIDWAY RD STREET ADDRESS STREET ADDRESS 4700 West Midway Road Fort_Pierce; FL - 34981 CITY-ST-ZIP CITY-ST-ZIP FT PIERCE FL 34981 TITLE TITLE ☐ Change Addition Addition **Delete** SCHWAB, TAMARA NAME NAME Shelia Randazzo STREET ADDRESS 4700 WEST MIDWAY ROAD STREET ADDRESS 4700 West Midway Road Fort Pierce FL 34981 CITY-ST-ZIP FORT PIERCE FL CITY-ST-ZIP Delete TITLE ☐ Change Addition TITLE DIPALERMO, MIKE NAME NAME Dennis Nickel 4700 West Midway Road STREET ADDRESS 4700 WEST MIDWAY ROAD STREET ADDRESS CITY-ST-ZIP FORT PIERCE FL CITY-ST-ZIP Fort Pierce, FL

I hereby certify that the information supplied with this filling does not qualify 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 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

STREET ADDRESS CITY-ST-ZIP

TITLE

NAME

Olkaren Countryman Secretary

☐ Delete

TITLE

NAME

STREET ADDRESS

HOFFMAN, GLENN

FORT PIERCE FL

4700 WEST MIDWAY RAOD

561-462-3264

□ Change

☐ Addition