2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 749138

FILED Jan 27, 2005 Secretary of State

Entity Name: PALM BEACH CRIME WATCH, INC.

Current Principal Place of Business:	New Principal Place of Business:
Surrent Finicipal Flace of Business.	New Fillicipal Flace of Dusiliess.

345 S. COUNTY ROAD 345 S. COUNTY ROAD P.O. BOX 547 PALM BEACH, FL 33480 PALM BEACH, FL 33480

New Mailing Address: Current Mailing Address:

345 S. COUNTY ROAD P.O. BOX 547

P.O. BOX 547 PALM BEACH, FL 33480

PALM BEACH, FL 33480

FEI Number: 59-1941254 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

KINSELLA, JANET 345 S COÚNTY RD PALM BCH, FL 33480 US

OFFICERS AND DIRECTORS:

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:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Change () Addition () Delete

KINSELLA, JANET, Name: Name: Address: 345 S. COUNTY ROAD Address: City-St-Zip: PALM BEACH, FL City-St-Zip:

Title: () Delete Title: (X) Change () Addition

Name: BROGAN, JOHN J Name: BROGAN, JOHN J Address: 400 N. FLAGLER DRIVE #1905 Address: 1130 DEVONSHIRE WAY

City-St-Zip: WEST PALM BEACH, FL 33401 City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: () Delete Title: () Change () Addition

REITER, MICHAEL S Name: Name: 345 S COUNTY RD Address: Address: City-St-Zip: PALM BEACH, FL 33480 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: JANET KINSELLA D 01/27/2005