## 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT#757676**

FILED Feb 08, 2011 Secretary of State

Date

Entity Name: COMMUNITY ACTION STOPS ABUSE, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

1011 1ST AVE N.

ST. PETERSBURG, FL 33701 US

**Current Mailing Address: New Mailing Address:** 

PO BOX 414

ST PETERSBURG, FL 337310414

FEI Number: 59-2114359 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

POLSON, MARILYN FISHER & SAULS, PA 100 SECOND AVENUE SOUTH, SUITE 701 ST. PETERSBURG, FL 33701 ÚS

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

## **OFFICERS AND DIRECTORS:**

CUYKENDALL, AMY Name: Address: P.O. BOX 76262

City-St-Zip: ST. PETERSBURG, FL 33734

Title: MGRM

Name: OSMUNDSON, LINDA A

Address: P.O. BOX 414

City-St-Zip: ST. PETERSBURG, FL 33731

Title:

BARNUM, ROBERT Name: Address: 3136 3RD AVENUE N

City-St-Zip: SAINT PETERSBURG, FL 33713

Title:

Name: KRAUSE, JEAN Address: 9889 SAGO POINT City-St-Zip: LARGO, FL 33777

Title:

CULPEPPER, DONALD Name: 3136 3RD AVENUE N Address: City-St-Zip: ST. PETERSBURG, FL 33713

Title:

HOWE, TRUDY Name: Address: 1940 HAWAII AVE NE ST. PETERSBURG, FL 33703 City-St-Zip:

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: LINDA A OSMUNDSON **MGRM** 02/08/2011