2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Mar 14, 2005 08:00 AM

	AITITOAL	ILE VILL		_	Sec	retary of Sta	ite	
1. Entity Nam	MENT # 759901 CRIME WATCH, INC.	***				ctary or Sta		
Principal Plac 210 MILITAR JUPITER, FL		Mailing Address 210 MILITARY TRAIL JUPITER, FL 33458						
	O NOT WRITE	IN THIS SDA	CF.	1 ,55,17 (85)	No Chg-NP	CR2E037 (10/03)		
			V L	4. FEI Numb 59-603 5. Certificate		Applied Not Appl \$8.75 Additional Fee Required	ficable	
	6. Name and Address of Current R	egistered Agent	↓ .					
	ANK ARY TRAIL FL 33458			NOT W THIS SF				
8. The above	named entity submits this statement for	the ourpose of changing its register	ed office or reals	stered agent, or bo	th, in the State of Flo	orlda. I am familiar with, and a	accept	
the obligations of registered agent.								
SIGNATURE								
Signature, typed or printed name of registered agent and life it applicable (NOTE. Registered Agent signature required when reinstating) DATE								
	Filing Fee is \$61.25 Due by May 1, 2005	Election Campaign Fina Trust Fund Contribution.		5.00 May Be added to Fees				
10.	OFFICERS AND D	IRECTORS						
TITLE NAME	PD WESTGATE, RICHARD							
STREET ADDRESS	210 MILITARY TRAIL							
CITY-ST-ZIP	JUPITER, FL 00000,		j		U000 00 2	262939 30077-002 61.25		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HESS, FRANK 210 MILITARY TRAIL JUPITER, FL 33458			-	03/14/05-1	30077-002 61.25		
NAME STREET ADDRESS CITY+ST-ZIP	VD O'NEILL, ROBERT 210 MILITARY TRAIL JUPITER, FL 33458			DO	NOT W	/RITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S HUBBARD, RICHARD 210 MILITARY TRL JUPITER, FL 33458		IN THIS SPACE					
TITLE NAME STREET ADDRESS CITY-ST-ZIP								
TITLE NAME STREET ADDRESS								

12. I hereby certify that the information supplied with this filing 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 eath; 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATUR	
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City-ST-ZIP

THANK HOS TO FRANK W. HESS CHATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

561-746-6201