

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 05, 2005 8:00 am
Secretary of State

04-05-2005 90053 006 ****61.25

DOCUMENT # 761557 1. Entity Name ALACHUA COUNTY CRIME STOPPERS, INC.	
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Principal Place of Business 411 N. MAIN STREET GAINESVILLE, FL 32601	Mailing Address P.O. BOX 2603 GAINESVILLE, FL 32602
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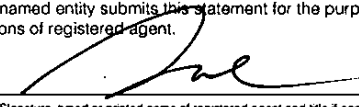
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



04042005 Chg-NP CR2E037 (10/03)

6. Name and Address of Current Registered Agent	
LONG, GEORGE W III 620 NW 16TH AVE GAINESVILLE, FL 32602	

7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	FL Zip Code

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. I am familiar with, and accept the obligations of registered agent.	
SIGNATURE 	4/4/05
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)	

Filing Fee is \$61.25 Due by May 1, 2005	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD MARSTON, WES PO BOX 998 ALACHUA, FL 32618 ☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD BATHFIELD, JACK 3746 N.W. 28TH PLACE GAINESVILLE, FL 32605 ☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SLAUGHTER, LEANN PO BOX 128 ARCHER, FL 32618 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T LONG, GEORGE W III 620 NW 16 AVE GAINESVILLE, FL 32602 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD Jeppson, Steve 4332 NW 32nd St. Gainesville, FL 32605 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD Battenfield, Jack 3746 NW 28th Place Gainesville, FL 32605 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

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 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: 	4/4/05	352-378-1331
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		