2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 28, 2008
Secretary of State

DOCUMENT# 761557

Entity Name: ALACHUA COUNTY CRIME STOPPERS, INC.

Current Principal Place of Business:

120 W UNIVERSITY AVE
GAINESVILLE, FL 32601

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2603
GAINESVILLE, FL 32602

New Mailing Address:

FEI Number: 59-2374619 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

DAVIES, ELIZABETH P
3401 SW 100TH ST
GAINESVILLE, FL 32607 US

Name and Address of New Registered Agent:

DAVIES, ELIZABETH P
3911 NEWBERRY RD
STE C-2
GAINESVILLE, FL 32607 US

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: _____ 07/28/2008
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: CD ( ) Delete
Name: NEWMAN, LOU
Address: 3949 NW 38TH PLACE
City-St-Zip: GAINESVILLE, FL 32606

Title: VD ( ) Delete
Name: KAM, ONILDA
Address: 4424 NW 13TH ST #100
City-St-Zip: GAINESVILLE, FL 32609

Title: S ( ) Delete
Name: SLAUGHTER, LEANN
Address: 13421 SW 173RD CT
City-St-Zip: ARCHER, FL 32618

Title: T ( ) Delete
Name: DAVIES, ELIZABETH P
Address: 3401 SW 100TH STREET
City-St-Zip: GAINESVILLE, FL 32607

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: VC (X) Change ( ) Addition
Name: STEADHAM, CHARLES
Address: 203 SW 3RD AVE
City-St-Zip: GAINESVILLE, FL 32601

Title: S (X) Change ( ) Addition
Name: JEPPSON, STEVE`
Address: 4333 NW 32ND ST
City-St-Zip: GAINESVILLE, FL 32605

Title: T (X) Change ( ) Addition
Name: DAVIES, ELIZABETH P
Address: 3911 W NEWBERRY RD
City-St-Zip: GAINESVILLE, FL 32607

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: ELIZABETH DAVIES T 07/28/2008
Electronic Signature of Signing Officer or Director — Date