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NONPROFIT CORPORATION ANNUAL REPORT 1999				FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # 764489 ✓					
1. Corporation Name CRIME PREVENTION OF WEST PALM BEACH, INC.					
Principal Place of Business 600 BANYAN BLVD WEST PALM BEACH FL 33401 US			Mailing Address P.O. BOX 1390 WEST PALM BEACH FL 33402 US		
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country		3. Date Incorporated or Qualified 09/02/1982 4. FEI Number 59-2293239 Applied For Not Applicable 5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution ☒ \$5.00 May Be Added to Fees	
9. Name and Address of Current Registered Agent SUAREZ, JESUS 600 BANYAN BLVD W. PALM BEACH FL 33401			10. Name and Address of New Registered Agent 81 Name CLINTON C. BIRD 82 Street Address (P.O. Box Number is Not Acceptable) 2830 HANCOCK CREEK RD. 83 84 City WEST PALM BEACH, FL 85 Zip Code 33411		
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE CLINTON C. BIRD TD <i>Clinton C. Bird</i> JUNE 29, 1999 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)					
12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE PD NAME SUAREZ, JESUS STREET ADDRESS 600 BANYAN BLVD CITY-ST-ZIP WEST PALM BEACH FL 33401 ☒ DELETE			1.1 TITLE PD 1.2 NAME HELEN VALLEE 1.3 STREET ADDRESS 331 WINTERS ST. 1.4 CITY-ST-ZIP WEST PALM BEACH, FL, 33405 ☒ Change ☐ Addition		
TITLE VD NAME LEVINE, ALAN STREET ADDRESS 114 MURRAY RD CITY-ST-ZIP W.PALM BCH. FL 33405 ☐ DELETE			2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP		
TITLE TD NAME DRIGGERS, WILLIAM STREET ADDRESS 415 MONROE DR CITY-ST-ZIP W.PALM BCH. FL 33405 ☒ DELETE			3.1 TITLE TD 3.2 NAME CLINTON C. BIRD 3.3 STREET ADDRESS 2830 HANCOCK CREEK RD. 3.4 CITY-ST-ZIP WEST PALM BEACH, FL, 33411-5733 ☒ Change ☐ Addition		
TITLE S NAME KNIGHT, TERRY STREET ADDRESS 3315 LIDDY AVE CITY-ST-ZIP W.PALM BCH. FL 33407 ☐ DELETE			4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ DELETE			5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ DELETE			6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP		

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Clinton C. Bird* SIGNATURE REQUIRED CLINTON C. BIRD 6-29-99 (561) 478-0472
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

0040904

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