

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 24, 2005 8:00 am
Secretary of State

03-24-2005 90025 008 ****61.25

DOCUMENT # 764489

1. Entity Name
CRIME PREVENTION OF WEST PALM BEACH, INC.



40007743

Principal Place of Business
600 BANYAN BLVD
WEST PALM BEACH, FL 33401 US

Mailing Address
P.O. BOX 851
WEST PALM BEACH, FL 33402 US



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

02102005 Chg-NP CR2E037 (10/03)

City & State

City & State

4. FEI Number
59-2293239

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

KALIS-PARNES, KATHY
7634 QUIDA DRIVE
WEST PALM BEACH, FL 33411

Name **WILLIAM LITTLE**

Street Address (P.O. Box Number is Not Acceptable)
3814 SHELLEY RD N

City **WEST PALM BEACH**

FL Zip Code **33407**

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 William F. Little **WILLIAM F. LITTLE, SECRETARY**
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

3/20/2005
DATE

**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**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD
NAME EDDINS, JAMES ☐ Delete
STREET ADDRESS 2271 BLUE SPRINGS ROAD
CITY-ST-ZIP WEST PALM BEACH, FL 33411

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VPD
NAME EGAN, JOE ☐ Delete
STREET ADDRESS 727 45TH STREET
CITY-ST-ZIP WEST PALM BEACH, FL 33407

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE STD ☒ Delete
NAME KALIS-PARNES, KATHY
STREET ADDRESS 7634 QUIDA DRIVE
CITY-ST-ZIP WEST PALM BEACH, FL 33411

TITLE VPD ☐ Change ☒ Addition
NAME DON PARNES
STREET ADDRESS 7634 QUIDA DR
CITY-ST-ZIP WEST PALM BEACH FL 33411

TITLE D ☒ Delete
NAME VALLEE, HELEN
STREET ADDRESS 331 WINTERS STREET
CITY-ST-ZIP WEST PALM BEACH, FL 33405

TITLE SD ☐ Change ☒ Addition
NAME WILLIAM LITTLE
STREET ADDRESS 3814 SHELLEY RDN
CITY-ST-ZIP WEST PALM BEACH FL 33407

TITLE D ☒ Delete
NAME FLANAGAN, MARTIN
STREET ADDRESS 115 RUSSLYN DRIVE
CITY-ST-ZIP WEST PALM BEACH, FL 33405

TITLE TD ☐ Change ☒ Addition
NAME MATIAS de la FUENTE
STREET ADDRESS 2861 LIVINGSTON LN
CITY-ST-ZIP WEST PALM BEACH FL 33411

TITLE D ☐ Delete
NAME HENIN, JERRY
STREET ADDRESS 2555 LIVINGSTON DRIVE
CITY-ST-ZIP WEST PALM BEACH, FL 33411

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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: William F. Little **WILLIAM F. LITTLE**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/20/2005 561 683 3107
Date Daytime Phone #