2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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Jan 26, 2007 8:00 am
Secretary of State
01-26-2007 90031 006 ****61.25

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01222007 Chg-NP CR2E037 (12/06)

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1. Entity 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 851
WEST PALM BEACH, FL 33402 US

2. Principal Place of Business - No P.O. Box #
Suite, Apt. #, etc.
City & State
Zip
Country

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip
Country

4. FEI Number 59-2293239 — Applied For / Not Applicable

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

6. Name and Address of Current Registered Agent
SINE, CHERYL
524 UPLAND RD
WEST PALM BEACH, FL 33401

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 Cheryl Sine 1/24/07
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee Is $61.25
Due by May 1, 2007

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 ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	EDDINS, JAMES	NAME	
STREET ADDRESS	2271 BLUE SPRINGS ROAD	STREET ADDRESS	
CITY-ST-ZIP	WEST PALM BEACH, FL 33411	CITY-ST-ZIP	
TITLE	~~VPD~~ ☐ Delete	TITLE	D ☑ Change ☐ Addition
NAME	FERMAN, JERRY	NAME	
STREET ADDRESS	2176 CHICKCHARNIES RD	STREET ADDRESS	Everything eles the same for this person
CITY-ST-ZIP	WEST PALM BEACH, FL 33411	CITY-ST-ZIP	
TITLE	VPD ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	PARNES, DON	NAME	
STREET ADDRESS	7634 QUIDA DR	STREET ADDRESS	
CITY-ST-ZIP	WEST PALM BEACH, FL 33411	CITY-ST-ZIP	
TITLE	SD ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	SINE, CHERYL	NAME	
STREET ADDRESS	524 UPLAND RD	STREET ADDRESS	
CITY-ST-ZIP	WEST PALM BEACH, FL 33401	CITY-ST-ZIP	
TITLE	TD ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	STEVE, WESSLER	NAME	
STREET ADDRESS	2213 BLUE SPRINGS RD	STREET ADDRESS	
CITY-ST-ZIP	WEST PALM BEACH, FL 33411	CITY-ST-ZIP	
TITLE	D ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	HENIN, JERRY	NAME	
STREET ADDRESS	2555 LIVINGSTON DRIVE	STREET ADDRESS	
CITY-ST-ZIP	WEST PALM BEACH, FL 33411	CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Cheryl Sine 1/24/07 561-822-1621
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #