2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT#769626

Sep 27, 2002 Secretary of State

Entity Name: CITIZEN'S CRIME ALERT OF FT. LAUDERDALE, INC.

Current Principal Place of Business: New Principal Place of Business: PO BOX 4712 FT LAUDERDALE, FL 33338 **Current Mailing Address: New Mailing Address:** PO BOX 4712 FT LAUDERDALE, FL 33338 FEI Number: 59-2347556 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MAYERS, PAT 549 NE 11 AVE FORT LAUDERDALE, FL 33301 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete BONEY, LINDA G GIBBONEY, LINDA Name: Name: 1700 S.W. 7TH TCE Address: 1700 NW 7TH TERRACE Address: City-St-Zip: FT LAUDERDALE, FL City-St-Zip: FT LAUDERDALE, FL 33311 Title: Title: (X) Change () Addition () Delete HOFFMAN, JOY Name: HOFFMAN, JOY Name: Address: 209 N.E. 5TH STREET Address: 209 N.E. 5TH STREET City-St-Zip: FT LAUDERDALE, FL City-St-Zip: FT LAUDERDALE, FL 33301 Title: Title: (X) Change () Addition () Delete PISUT, LISA PISUT, LISA Name: Name: 500 SE 12 COURT Address: Address: 500 SE 12 COURT City-St-Zip: FORT LAUDERDALE, FL 33316 City-St-Zip: FORT LAUDERDALE, FL 33316 Title: () Delete Title: () Change () Addition Name: DAVIS, MARJORIE Name: Address: 1713 N.W. 5TH STREET Address: City-St-Zip: FT. LAUDERDALE, FL City-St-Zip: Title: () Delete Title: () Change () Addition GREGORY, ANNIE Name: Name: 505 NW 19 AVE Address: Address: FORT LAUDERDALE, FL 33311 City-St-Zip: City-St-Zip: Title: () Delete Title: (X) Change () Addition MAYERS, PATRICIA MAYERS, PATRICIA Name: Name: Address: 549 N.E. 11TH AVENUE Address: 549 N.E. 11TH AVENUE FT. LAUDERDALE, FL FT. LAUDERDALE, FL City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: PATRICIA A. MAYERS PRES 09/27/2002