

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 13, 2004 8:00 am
Secretary of State

04-13-2004 90017 040 ****61.25

DOCUMENT # 770190

1. Entity Name

CHASSAHOWITZKA CRIME PREVENTION, INC.



Principal Place of Business

10096 SO RIVIERA PT
HOMOSASSA FL 34448
US

Mailing Address

10096 SO RIVIERA PT
HOMOSASSA FL 34448
US

44020111



MOORE CR2E037 (11/03)

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

NO-T APPLICABLE

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

WOOD, KENNETH R
10096 SO RIVIERA PT
HOMOSASSA FL 34448

Name

RUTH A WOOD

Street Address (P.O. Box Number is Not Acceptable)

10096 S RIVIERA PT

HOMOSASSA

City

FL

Zip Code

34448

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

Ruth A Wood

Signature, typed or printed name of registered agent and title if applicable.

Ruth A Wood

(NOTE: Registered Agent signature required when reinstating)

4-12-04

DATE

**FILE NOW: FEE IS \$61.25
Due By May 1, 2004**

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

TITLE PD
NAME WOOD, KENNETH
STREET ADDRESS 10096 SO RIVIERA PT
CITY-ST-ZIP HOMOSASSA FL 34448 ☒ Delete

TITLE VPD
NAME GRAHE, GENE
STREET ADDRESS 8391 W SCOTT CT
CITY-ST-ZIP HOMOSASSA FL ☒ Delete

TITLE D
NAME HAMILTON, MARIE
STREET ADDRESS 8191 W. PIN OAK CT.
CITY-ST-ZIP HOMOSASSA FL ☐ Delete

TITLE
NAME WOOD, RUTH A
STREET ADDRESS 10096 S RIVIERA A
CITY-ST-ZIP HOMOSASSA FL 34448 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD
NAME GENE GRAHE
STREET ADDRESS 8391 W. SCOTT
CITY-ST-ZIP HOMOSASSA FL 34448 ☐ Change ☒ Addition

TITLE VPD
NAME EUGENE COLE
STREET ADDRESS
CITY-ST-ZIP HOMOSASSA FL 34448 ☐ Change ☒ Addition

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

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

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

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(j), 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:

Ruth A Wood

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Ruth A Wood

Apr 12 2004

Date

Daytime Phone #

352
382 1522