

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000001033

FILED
Apr 10, 2009
Secretary of State

Entity Name: CITIZENS FOR TREE PRESERVATION, INC.

Current Principal Place of Business:

% JOHN CRESCIMBENI
1549 CESERY BLVD
JACKSONVILLE, FL 32211

New Principal Place of Business:

C/O JOHN CRESCIMBENI
1549 CESERY BLVD
JACKSONVILLE, FL 32211

Current Mailing Address:

% JOHN CRESCIMBENI
1549 CESERY BLVD
JACKSONVILLE, FL 32211

New Mailing Address:

C/O JOHN CRESCIMBENI
1549 CESERY BLVD
JACKSONVILLE, FL 32211

FEI Number: 59-3622743

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRINTON, WILLIAM D
1301 RIVERPLACE BLVD
SUITE 1500
JACKSONVILLE, FL 32207 US

Name and Address of New Registered Agent:

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:

Title: D () Delete
Name: BRINTON, WILLIAM D
Address: 1835 CHALLENGE AVE
City-St-Zip: JACKSONVILLE, FL 32205

Title: D () Delete
Name: CAVEN, SUSAN
Address: 2775 WHITE OAK LANE
City-St-Zip: JACKSONVILLE, FL 322074135

Title: D () Delete
Name: CRESCIMBENI, JOHN
Address: 5735 DICKSON ROAD
City-St-Zip: JACKSONVILLE, FL 322114610

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: WILLIAM D. BRINTON

.DIR

04/10/2009

Electronic Signature of Signing Officer or Director

Date