

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000002609

FILED
Feb 02, 2006
Secretary of State

Entity Name: THE COMPUTER RECYCLING PROGRAM, INC.

Current Principal Place of Business:

2851 SW 37TH AVENUE
MIAMI, FL 33133

New Principal Place of Business:

Current Mailing Address:

2851 SW 37TH AVENUE
MIAMI, FL 33133

New Mailing Address:

FEI Number: 65-1002617

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TURNER, TRACY A
2851 SW 37TH AVENUE
MIAMI, FL 33133 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: TURNER, TRACY A
Address: 2851 SW 37TH AVENUE
City-St-Zip: MIAMI, FL 33133

Title: D () Delete
Name: O'CONNOR, JAMES T
Address: 2851 SW 37TH AVENUE
City-St-Zip: MIAMI, FL 33133

Title: D () Delete
Name: BLAKE, SHARON
Address: 9631 SW 77TH AVENUE, C-301
City-St-Zip: MIAMI, FL 33156

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 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: TRACY A. TURNER

D

02/02/2006

Electronic Signature of Signing Officer or Director

Date