2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000007719

Entity Name: HALLANDALE BEACH CRIME WATCH, INC.

FILED Jul 06, 2006 Secretary of State

Current Principal Place of Business:		New Princ	cipal Place of Business:	
HALLAND	TH FEDERAL HWY PALE BEACH POLICE DEPT. PALE BEACH, FL 33009			
Current Mailing Address:		New Maili	New Mailing Address:	
HALLAND	TH FEDERAL HWY JALE BEACH POLICE DEPT. JALE BEACH, FL 33009			
In accordan	ice with s. 607.193(2)(b), F.S., the corporation did not receiv	-	ce.	
	ANDREAM	Maine and	I Address of New Registered Agent:	
400 SOUT	ANDREW M TH FEDERAL HWY ALE BEACH, FL 33009 US			
	e named entity submits this statement for the purpose e of Florida.	e of changing	its registered office or registered agent, or both,	
SIGNATUI	RE:			
	Electronic Signature of Registered Agent		Date	
OFFICERS AND DIRECTORS:		ADDITION	NS/CHANGES TO OFFICERS AND DIRECTO	
Title: Name: Address: City-St-Zip:	PD () Delete PINKUS, DONALD 2030 SOUTH OCEAN DRIVE, 720 HALLANDALE, FL 33009	Title: Name: Address: City-St-Zip:	PD (X) Change () Addition HASKINS, NORMA 814 SW 6TH AVENUE HALLANDALE BEACH, FL 33009	
Title: Name: Address: City-St-Zip:	VD () Delete GILCHRIST, MESSLER 641 SW 4TH. COURT HALLANDALE BEACH, FL 33009	Title: Name: Address: City-St-Zip:	VD (X) Change () Addition BRUCK, RICHARD 648 SW 2ND COURT HALLANDALE BEACH, FL 33009	
Title: Name: Address: City-St-Zip:	DT () Delete HAMMOND, SANDRA NE 12TH AVE BLDG #900 HALLANDALE BEACH, FL 33009	Title: Name: Address: City-St-Zip:	DT (X) Change () Addition FINE, LARRY 815 NE 6TH STREET HALLANDALE BEACH, FL 33009	
Title: Name: Address: City-St-Zip:	RS () Delete SANTOPIETRO, MAE 815 SW 10 TERR HALLANDALE BEACH, FL 33009	Title: Name: Address: City-St-Zip:	RS (X) Change () Addition WILLIAMS, TYRONE 532 NW 6TH AVENUE HALLANDALE BEACH, FL 33009	
Title: Name: Address: City-St-Zip:	CS (X) Delete HASKINS, NORMA 814 SW 6TH AVENUE HALLANDALE BEACH, FL 33009	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: NORMA HASKINS PD 07/06/2006