2006 NOT-FOR-PROFIT CORPORATION

ANNUAL REPORT

DOCUMENT # N01000000115

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FILED Feb 02, 2006 8:00 am Secretary of State

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CRIME S	TOPPERS OF PINELLAS C	OUNTY, INC.							
Principal Place of Business Mailing Address 10750 ULMERTON ROAD P.O. BOX 416 LARGO, FL 33778 LARGO, FL 33779-0416			6				1 1 £1 £1 1	L (1881 11881 8)	
2. Principal Place of Business 3. Maili		3. Mailing Address	ailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		01112006 Chg-	NP	CR2E037	' (11/05)	
City & State		City & State			4. FEI Number 59-3702397			No	plied For Applicable
Zip	Country	Zip	Country		5. Certificate of Statu		L F	8.75 Add ee Required	
	6. Name and Address of Current I	Registered Agent			7. Name and Addres	s of New Re	gistered Ag	gent	
FRALEY, SUSAN L 10750 ULMERTON ROAD LARGO, FL 33778				Name Street Address (P.O. Box Number is Not Acceptable)					
			City	,			FL	Zip Code	•
	named entity submits this statement for ions of registered agent.	r the purpose of changing its	registered offi	ce or register	red agent, or both, in the	State of Flor		l miliar with,	and accept
SIGNATURE .	Signature, typed or printed name of registered agent of	and title if applicable. (NOTE	: Registered Agent	signature required	d when reinstating)		DATE		
SIGNATURE .	Filling Fee is \$61.25 Due by May 1, 2006	9. Election Can Trust Fund C	npaign Financi		\$5.00 May Be Added to Fees		DATE nke check da Departr		
SIGNATURE .	Filing Fee is \$61.25	9. Election Can Trust Fund C	npaign Financi	ing	\$5.00 May Be	Florie	ake check da Departr	ment of St	ate
	Filing Fee is \$61.25 Due by May 1, 2006	9. Election Can Trust Fund C	npaign Financi contribution.	ing	\$5.00 May Be Added to Fees	Florie	ake check da Departr	ment of St	ate
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I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR