

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000000263

FILED
Jun 29, 2005
Secretary of State

Entity Name: COALITION FOR A SAFE AND DRUG FREE ST. PETERSBURG, INC.

Current Principal Place of Business:

21 DR. MARTIN LUTHER KING ST. S.
ST. PETERSBURG, FL 33705

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1273
ST. PETERSBURG, FL 33731

New Mailing Address:

FEI Number: 59-3716916 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

HAYNES, WATSON L II
21 DR. MLK ST. SOUTH
SAINT PETERSBURG, FL 33705 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: DC () Delete
Name: LEWIS, MICHAEL
Address: 17757 U.S. HWY 19 N STE. 560
City-St-Zip: CLEARWATER, FL 33764

Title: B () Delete
Name: VAUGHN-JEMMISON, ADELLE
Address: 335 MADISON ST. S.
City-St-Zip: SAINT PETERSBURG, FL 33705

Title: ST () Delete
Name: MUHAMMED-AQUIL, ASKIA M
Address: 640 DR. MLK ST. S.
City-St-Zip: SAINT PETERSBURG, FL 33701

Title: B () Delete
Name: CUTLIFF, YATE
Address: P.O. BOX 11812
City-St-Zip: ST. PETERSBURG, FL 33733

Title: B () Delete
Name: CRAWFORD, REV. HAYDEN
Address: 2920 26 AVE S
City-St-Zip: SAINT PETERSBURG, FL 33712

Title: B () Delete
Name: ANDREWS, ARNOLD
Address: 1213 16 ST N
City-St-Zip: ST. PETERSBURG, FL 33705

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DC (X) Change () Addition
Name: MUHAMMAD-AQUIL, ASKIA
Address: 640 DR. MLK ST. S.
City-St-Zip: SAINT PETERSBURG, FL 33701

Title: VC (X) Change () Addition
Name: REED, KELLY DR
Address: 2001 WEST BAY DRIVE
City-St-Zip: LARGO, FL 33770

Title: S (X) Change () Addition
Name: TERRELL, GRADY
Address: 2067 1ST AVENUE NORTH
City-St-Zip: SAINT PETERSBURG, FL 33731

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

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

Title: T (X) Change () Addition
Name: PULLER, WILLIAM
Address: 4133 CORTEZ WAY SOUTH
City-St-Zip: ST. PETERSBURG, FL 33712

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ASKIA MUHAMMAD-AQUIL

DC

06/29/2005

Electronic Signature of Signing Officer or Director

Date