

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000007640

FILED
Mar 10, 2005
Secretary of State

Entity Name: CITIZENS FOR RESPONSIBLE GROWTH, INC.

Current Principal Place of Business:

P.O. BOX 411493
MELBOURNE, FL 32941

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 411493
MELBOURNE, FL 32941

New Mailing Address:

FEI Number: 59-3752518

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JURGENS, J.A.
505 WEKIVA SPRINGS RD., STE. 500
LONGWOOD, FL 32779 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: PD () Delete
Name: HOAGLAND, MELISSA H
Address: 1021 STRATFORD PLACE
City-St-Zip: MELBOURNE, FL 32940

Title: VD () Delete
Name: SALEMMA, ANNE B
Address: 4140 STONEY POINT RD.
City-St-Zip: MELBOURNE, FL 32940

Title: SD () Delete
Name: LYNCH, LIDIA
Address: 1009 MONTICELLO CT.
City-St-Zip: MELBOURNE, FL 32940

Title: TD () Delete
Name: ROGAN, BOB
Address: 1024 LENNOX WAY
City-St-Zip: MELBOURNE, FL 32940

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:

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 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: BOB ROGAN

TD

03/10/2005

Electronic Signature of Signing Officer or Director

Date