2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000001428

Current Principal Place of Business:

Entity Name: CITIZENS FOR PROPER PLANNING, INC.

FILED Apr 17, 2004 Secretary of State

New Principal Place of Business:

27 LAKE ELOISE LANE WINTER HAVEN, FL 33884

Current Mailing Address: New Mailing Address:

27 LAKE ELOISE LANE WINTER HAVEN, FL 33884

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

REED, JEAN S 27 LAKE ELOISE LANE WINTER HAVEN, FL 33884

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Change () Addition

() Change () Addition () Delete REED, JEAN Name: Name: Address: 27 LAKE ELOISE LANE Address: City-St-Zip: WINTER HAVEN, FL 33884 City-St-Zip: Title: Title: () Delete () Change () Addition Name: SWINGLE, PATRICIA Name: Address: 2899 ELOISE LOOP RD. Address: City-St-Zip: WINTER HAVEN, FL 33884 City-St-Zip: Title: () Delete Title: () Change () Addition COWLES, DEMING Name: Name: Address: 31 OAK ST. Address: City-St-Zip: BABSON PARK, FL 33827 City-St-Zip: Title: () Delete Title: () Change () Addition PATTERSON, STUART Name: Name: 80 JENNI ASHLEY CT. Address: Address: City-St-Zip: WINTER HAVEN, FL 33884 City-St-Zip:

 Title:
 D () Delete
 Title:

 Name:
 KOLLER, DANIEL
 Name:

 Address:
 27 LAKE ELOISE LANE
 Address:

 City-St-Zip:
 WINTER HAVEN, FL 33884
 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: JEAN REED D 04/17/2004