

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000001428

FILED
Apr 29, 2009
Secretary of State

Entity Name: CITIZENS FOR PROPER PLANNING, INC.

Current Principal Place of Business:

4009 CYPRESS LANDING SOUTH
WINTER HAVEN, FL 33884

New Principal Place of Business:

Current Mailing Address:

4009 CYPRESS LANDING SOUTH
WINTER HAVEN, FL 33884

New Mailing Address:

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

Name and Address of Current Registered Agent:

RUDICIL, CAMILLE K
4009 CYPRESS LANDING SOUTH
WINTER HAVEN, FL 33884 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: MR. () Delete
Name: JOHNSON, JOHN
Address: 219 VALENCIA DR.
City-St-Zip: AUBURNDALE, FL 33880

Title: MRS. () Delete
Name: SWINGLE, PATRICIA
Address: 2899 ELOISE LOOP RD.
City-St-Zip: WINTER HAVEN, FL 33884

Title: MR. () Delete
Name: COWLES, DEMING
Address: 31 OAK ST.
City-St-Zip: BABSON PARK, FL 33827

Title: MR. () Delete
Name: TOMLIN, RON
Address: 921 SUCCESS AVE..
City-St-Zip: LAKE LAND, FL 33801

Title: MRS. () Delete
Name: DAVIS, PEGGY
Address: 6741 ELOISE LOOP ROAD
City-St-Zip: WINTER HAVEN, FL 33884

Title: MS. () Delete
Name: RUDICIL, CAMILLE
Address: 4009 CYPRESS LANDING SOUTH
City-St-Zip: WINTER HAVEN, FL 33884

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: MRS. (X) Change () Addition
Name: CHIAVUZZI, DEEDEE
Address: HEATHER LANE S.E.
City-St-Zip: WINTER HAVEN, FL 33884

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: MS. (X) Change () Addition
Name: RUDICIL, CAMILLE K
Address: 4009 CYPRESS LANDING SOUTH
City-St-Zip: WINTER HAVEN, FL 33884

I hereby certify that the information supplied with this filing does not qualify 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: CAMILLE K. RUDICIL

MS.

04/29/2009

Electronic Signature of Signing Officer or Director

Date