## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N03000003352

FILED May 05, 2006 Secretary of State

Entity Name: CHARLOTTE ALLIANCE FOR A SAFE AND DRUG FREE COMMUNITY, INC.

Current Principal Place of Business: New Principal Place of Business:

1445 EDUCATION WAY RM250 PORT CHARLOTTE, FL 33948

Current Mailing Address: New Mailing Address:

1445 EDUCATION WAY RM250 PORT CHARLOTTE, FL 33948

FEI Number: 02-0683619 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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: Name and Address of New Registered Agent:

DIGNAM, DAVID CAMERON, WILLIAM 1201 S MCCALL RD 7474 UTILITIES ROAD

ENGLEWOOD, FL 34223 US PUNTA GORDA, FL 33981 US

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: WILLIAM F. CAMERON 05/05/2006

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

PUNTA GORDA, FL 33950

City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

PUNTA GORDA, FL 33950

Title: C ( ) Delete Title: C (X) Change ( ) Addition Name: DIGNAM, DAVID Name: CAMERON, WILLIAM

Address: 1201 S MCCALL RD Address: 7474 UTILITIES ROAD
City-St-Zip: ENGLEWOOD, FL 34223 City-St-Zip: PUNTA GORDA, FL 33981

Title: VC ( ) Delete Title: VC (X) Change ( ) Addition
Name: CLEMENT, WILLIAM Name: WIDMEYER, DONNA
Address: 7474 UTILITIES RD Address: 1445 EDUCATION WAY

Address: 74/4 UTILITIES RD Address: 1445 EDUCATION WAY

City-St-Zip: PUNTA GORDA, FL 33982 City-St-Zip: PORT CHARLOTTE, FL 33948

 $\label{eq:title:S} {\sf Title:} \qquad {\sf S} \qquad {\sf () Delete} \qquad \qquad {\sf Title:} \qquad {\sf S} \qquad {\sf (X) Change () Addition}$ 

Name:WIDMYER, DONNAName:CUMMINGS, STEVENAddress:1445 EDUCATION WAY RM250Address:1445 EDUCATION WAY RM250City-St-Zip:PORT CHARLOTTE, FL 33948City-St-Zip:PORT CHARLOTTE, FL 33948

Title: T ( ) Delete Title: T (X) Change ( ) Addition

Name: ROSS, GERALD Name: JAMES, BILL
Address: 1700 EDUCATION AVE Address: 1700 EDUCATION AVE

I hereby certify that the information supplied with this filing does not qualify for the 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.

City-St-Zip:

SIGNATURE: AMITY A CHANDLER DIR 05/05/2006