

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED

May 02, 2008 08:00 AM
Secretary of State

DOCUMENT # N03000007547

1. Entity Name
CITIZEN'S FOR TERM LIMITS & ACCOUNTABILITY
COMMITTEE, INC.



Principal Place of Business
3116 MOODY AVENUE
ORANGE PARK, FL 32065

Mailing Address
3116 MOODY AVENUE
ORANGE PARK, FL 32065



04262008 No Chg-NP

CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number

59-3625692

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SMITH, DURWOOD / N03000007547
3116 MOODY AVENUE
ORANGE PARK, FL 32065

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

3116 MOODY AVENUE
ORANGE PARK, FL 32065

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee Is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees.

U000000946574
05/30/08-80052-025 70.00

10. OFFICERS AND DIRECTORS

TITLE	DPT
NAME	SMITH, DURWOOD
STREET ADDRESS	3116 MOODY AVENUE
CITY-ST-ZIP	ORANGE PARK, FL 32065
Current Registered Agent	
TITLE	DV
NAME	PADGETT, JANE
STREET ADDRESS	3678 SAINT ANDREWS COURT
CITY-ST-ZIP	GREEN COVE SPRINGS, FL 32043
TITLE	DS
NAME	MILES, ROMI E
STREET ADDRESS	5325 DEER ISLAND ROAD
CITY-ST-ZIP	GREEN COVE SPRINGS, FL 32043
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Durwood Smith DURWOOD SMITH

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

APRIL 26, 2008 (904) 269-1578

Date

Daytime Phone #