2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2006
Secretary of State

DOCUMENT# N03000008294

Entity Name: METRO CRIME PREVENTION OF FLORIDA, INC.

Current Principal Place of Business:

6014 US HWY 19, STE 304
NEW PORT RICHEY, FL 34652

New Principal Place of Business:

Current Mailing Address:

6014 US HWY 19, STE 304
NEW PORT RICHEY, FL 34652

New Mailing Address:

FEI Number: 20-3186389 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ROBERT C GINDEL JR, P.A.
1850 FOREST HILIL BLVD, STE 103
WEST PALM BEACH, FL 33406 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: D ( ) Delete
Name: PINE, VICKI L
Address: 6014 US HWY 19, STE 304
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: D ( ) Delete
Name: PINE, JOSEPH S
Address: 6014 US HWY 19, STE 304
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: D ( ) Delete
Name: LINDEVAL, DAVID
Address: 6014 US HWY 19, STE 304
City-St-Zip: NEW PORT RICHEY, FL 34652

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: PINE, VICKI L
Address: 6014 US HWY 19, STE 304
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: VP (X) Change ( ) Addition
Name: PINE, JOSEPH S
Address: 6014 US HWY 19, STE 304
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: S (X) Change ( ) Addition
Name: LINDEVAL, DAVID
Address: 6014 US HWY 19, STE 304
City-St-Zip: NEW PORT RICHEY, FL 34652

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.

SIGNATURE: VICKI L. PINE VP 04/25/2006

Electronic Signature of Signing Officer or Director — Date