200	5 NOT-FOR-PRO ANNUAL RI		RATION					
1. Entity Name	MENT # N0400000100	6				05	FILED	
Principal Place	of Business	Mailing Address				0.0	FEB - 3 AM	11: 32
ATT: PHILIP ( 2601 S BAYS MIAMI FL 33	HORE DR STE 1600	ATT: PHILIP GUERRA 2601 S BAYSHORE DR MIAMI FL 33133	STE 1600		F (0011101 011	SEC TALL	RETRICCO AHASSIE, II	EATE Grant
2. Principal Pla	Ponce De Leon Blud	3. Mailing Address <b>3535 Ponc</b> _Suite, Apt. #, etc.	e Delen B	.vł				
Suit	<u>e 400</u>		70		1st M		R2E037 (10/04)	plied For
City & State	Gables, FL	Corral Ca	bles, FL		. Per Nulliber	<u>.</u>	No	t Applicable
3313	4 USA	33134		5	5. Certificate of Si	atus Desired	E \$8.75 Add Fee Required	litional d
	6. Name and Address of Current F	Registered Agent	Namo C	7		ress of New Regi	stered Agent	
GUE	rra, philip		Name	- <i>H'</i>		reex.		
2601	S BAYSHORE DR STE 160 MI FL 33133	0	asa	S P.L	Parce 1	Not Acceptable)	BIUZ.	
MAN	VI FL 33133		Su	ite	400			
1	$\square$			ard	2 Gable			34
8. The above i	named entity sybmits this statement for ons of registered agent.	the purpose of changing its r	registered office or re	agistered	agent, or both, in	the State of Florid	a. I am familiar with,	and accept
SIGNATURE	Signature, typed or printed nime of registered agent a	nd ule it applicable. (NOTE	Registered Agent signature	required the		<u> </u>	DATE	
	ILE NOW: FEE IS \$61.25 Due By May 1, 2005	Trust Fund C		] Ád	<b>5.00</b> May Be dded to Fees	Florida	Check Payable Department of S	State
10. TITLE	OFFICERS AND DIR		11. TITLE		ALER C. V	ES TO OFFICERS	AND DIRECTORS IN Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP				9294 790	5 Ponce	lenten N. Ce Lecu w,FL 33	BishHy	
TITLE NAME STREET ADDRESS CITY-SI-ZIP		Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	1095 2525 2625	S, George	FL331	Change K Blud HL 3L	Addition 1000
TITLE NAME STREET ADDRESS		. Delete	TITLE NAME STREET ADDRESS	There	tee, The La ph Anna	de Leon	Change	Addition U
CITY-ST-ZIP TITLE NAME STREET ADDRESS	• • :	Detete	THTLE NAME	75 75 75 75 75	uenzia	Chris de Leon	3102 440	CXAddition ~~
CITY-ST-ZIP			CITY-ST-ZIP	Cole	0 Gabli		31311	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		Deleto	TITLE NAME Street Address City-st-zip		200 02/22/09	04701 5010080	□ Change 9572 306 ***61.25	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				Change	Addition
12. I hereby certify that the information supplied with this filing does not qualify 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 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 susplemental report is 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:								

مرد منتخرین ۱۹۰۰ - ۱۹۰۶ ۱۹	t a c		
To: Fax:	Tyrone Scott 18502456017	Date:	Mon, 14 Feb 2005 17:06:30 - 0500
From:	Margee Ryder	# of Pages:	1
Ref #:	009900.0007		
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Comments:

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Mr. Scott:

I apologize for the omission of the tax identification numbers for the three Concerned Citizens entities. They are as follows: Concerned Citizens of Miami-Dade, Inc. - 20-0655254

Concerned Citizens of Broward, Inc. - 20-0655215

Concerned Citizens of Palm Beach, Inc. 20-0655165

If you need any additional information, please call me at my direct number 305.460.1162

Adomo & Yoss LLP 2525 Ponce de Leon Boulevard Suite 400 Miami, Florida 33134

(305) 460-1000

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