2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 13, 2009
Secretary of State

DOCUMENT# N04000002690

Entity Name: CRIME STOPPERS OF HOLMES COUNTY INC

Current Principal Place of Business:

211 N OKLAHOMA ST
BONIFAY, FL 32425

New Principal Place of Business:

211 N. OKLAHOMA STREET
BONIFAY, FL 32425

Current Mailing Address:

P.O. BOX 1004
BONIFAY, FL 32425

New Mailing Address:

FEI Number: 30-0226398 **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:

BARTON, JANIS
1103 NEW BAGVIEW CHURCH RD
BONIFAY, FL 32425 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:	PD	( ) Delete
Name:	WHITE, LARRY G	
Address:	1161 ALEX BROWN RD	
City-St-Zip:	BONIFAY, FL 32425	
Title:	D	( ) Delete
Name:	OLIVER, O.J.	
Address:	3046 HWY 2	
City-St-Zip:	BONIFAY, FL 32425	
Title:	V	( ) Delete
Name:	MCCORMICK, SHAY	
Address:	312 W PENN AVE	
City-St-Zip:	BONIFAY, FL 32425	
Title:	S	( ) Delete
Name:	WEST, JEAN	
Address:	211 W IOWA AVE	
City-St-Zip:	BONIFAY, FL 32425	
Title:	T	( ) Delete
Name:	YATES, KENNETH R	
Address:	409 E INDIANA AVE	
City-St-Zip:	BONIFAY, FL 32425	
Title:	PD	( ) Delete
Name:	BARTON, JANIS	
Address:	1103 NEW BAYVIEW CHURCH RD	
City-St-Zip:	BONIFAY, FL 32425	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: LARRY G. WHITE PD 05/13/2009

Electronic Signature of Signing Officer or Director — Date