

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000007405

FILED  
Jan 12, 2009  
Secretary of State

**Entity Name:** FLORIDA CITIZENS FOR SOCIAL REFORM, INC.

**Current Principal Place of Business:**

1927 SEVER DR.  
CLEARWATER, FL 33764

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 241  
CLEARWATER, FL 33757

**New Mailing Address:**

**FEI Number:** 47-0914797

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MILLER, BRETT  
2519 MCMULLEN BOOTH ROAD  
SUITE 510-199  
CLEARWATER, FL 33761 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: SIGAL, JOANIE  
Address: 1927 SEVER DRIVE  
City-St-Zip: CLEARWATER, FL 33764

Title: D ( ) Delete  
Name: MILLER, BRETT  
Address: 2519 MCMULLEN BOOTH ROAD SUITE 510-199  
City-St-Zip: CLEARWATER, FL 33761

Title: D ( ) Delete  
Name: MEEKCOMS, JAN  
Address: 1920 SADDLE HILL ROAD NORTH  
City-St-Zip: DUNEDIN, FL 34698

Title: ST ( ) Delete  
Name: BROWN, PATTI  
Address: 303 PONCE DE LEON BLVD.  
City-St-Zip: BELLEAIR, FL 33756

**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: ST (X) Change ( ) Addition  
Name: RODEGHERO, GINGER  
Address: 1002 JEFFORDS STREET  
City-St-Zip: CLEARWATER, FL 33756

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: BRETT MILLER

D

01/12/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date