

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 09, 2008 8:00 am
Secretary of State

05-09-2008 90015 041 ****70.00

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1. Entity Name

CONCERNED CITIZENS OF TARPON SPRINGS, INC.



Principal Place of Business

1846 LEXINGTON PL
TARPON SPRINGS FL 34688

Mailing Address

1846 LEXINGTON PL
TARPON SPRINGS FL 34688

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/07)

4. FEI Number

20-2658526

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LARSEN, DORY
1846 LEXINGTON PL
TARPON SPRINGS FL 34688

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Dory Larsen

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

(NOTE: Registered Agent signature required when reinstating)

3/17/08

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE: D
NAME: GLADWIN, HELEN
STREET ADDRESS: 420 DORIC CT
CITY-ST-ZIP: TARPON SPRINGS FL 34689 ☒ Delete

TITLE: D
NAME: BATUYIOS, HARRY
STREET ADDRESS: 46 READ ST
CITY-ST-ZIP: TARPON SPRINGS FL 34689 ☒ Delete

TITLE: D
NAME: CROSATO, BRIAN R
STREET ADDRESS: 616 PALM AVENUE
CITY-ST-ZIP: TARPON SPRINGS FL 34689 ☒ Delete

TITLE: ☐ Delete
NAME: ☐ Delete
STREET ADDRESS: ☐ Delete
CITY-ST-ZIP: ☐ Delete

TITLE: ☐ Delete
NAME: ☐ Delete
STREET ADDRESS: ☐ Delete
CITY-ST-ZIP: ☐ Delete

TITLE: ☐ Delete
NAME: ☐ Delete
STREET ADDRESS: ☐ Delete
CITY-ST-ZIP: ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE: Vice President
NAME: August Anderson
STREET ADDRESS: 1249 North Florida Ave
CITY-ST-ZIP: Tarpon Springs, FL 34689 ☒ Change ☐ Addition

TITLE: Treasurer
NAME: Andy Enis
STREET ADDRESS: 1384 Sail Harbor Cir.
CITY-ST-ZIP: Tarpon Springs, FL 34689 ☒ Change ☐ Addition

TITLE: Secretary
NAME: Lin Carter
STREET ADDRESS: 1249 North Florida Ave
CITY-ST-ZIP: Tarpon Springs, FL 34689 ☒ Change ☐ Addition

TITLE: Sergeant at Arms
NAME: Bill Gladwin
STREET ADDRESS: 420 Doric Ct
CITY-ST-ZIP: Tarpon Springs FL 34689 ☒ Change ☒ Addition

TITLE: President
NAME: Dory Larsen
STREET ADDRESS: 1846 Lexington Pl.
CITY-ST-ZIP: Tarpon Springs, FL 34688 ☐ Change ☒ Addition

TITLE: ☐ Change ☐ Addition
NAME: ☐ Change ☐ Addition
STREET ADDRESS: ☐ Change ☐ Addition
CITY-ST-ZIP: ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

Dory Larsen

4/9/08 727-938-3177