

**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 19, 2006 8:00 am
Secretary of State

05-08-2006 90298 050 ****61.25

DOCUMENT # N05000007923 1. Entity Name CONCERNED CITIZENS OF CRYSTAL RIVER, INC.					
Principal Place of Business 849 KINGS BAY DR. CRYSTAL RIVER, FL 34429			Mailing Address P.O. BOX 903 CRYSTAL RIVER, FL 34423		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 51-0550663	
5. Certificate of Status Desired ☐				Applied For ☐ Not Applicable	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
TITUS, CLAIRE A. 849 SW KINGS BAY DR. CRYSTAL RIVER, FL 34429				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 _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)					
Filing Fee is \$61.25 Due by September 6, 2006		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				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	DP	☐ Delete		TITLE	☐ Change ☐ Addition
NAME	PRICE, PHILLIP W.			NAME	
STREET ADDRESS	105 SE 10 ST.			STREET ADDRESS	
CITY - ST - ZIP	CRYSTAL RIVER, FL 34429			CITY - ST - ZIP	
TITLE	DV	☐ Delete		TITLE	☐ Change ☐ Addition
NAME	TITUS, JOHN J.			NAME	
STREET ADDRESS	849 KINGS BAY DR.			STREET ADDRESS	
CITY - ST - ZIP	CRYSTAL RIVER, FL 34429			CITY - ST - ZIP	
TITLE	DS	☐ Delete		TITLE	☐ Change ☐ Addition
NAME	JANNERONE, PHILLIP A.			NAME	
STREET ADDRESS	1405 SE 5TH AVE.			STREET ADDRESS	
CITY - ST - ZIP	CRYSTAL RIVER, FL 34429			CITY - ST - ZIP	
TITLE	DT	☐ Delete		TITLE	☐ Change ☐ Addition
NAME	TITUS, CLAIRE A.			NAME	
STREET ADDRESS	849 KINGS BAY DR.			STREET ADDRESS	
CITY - ST - ZIP	CRYSTAL RIVER, FL 34429			CITY - ST - ZIP	
TITLE		☐ Delete		TITLE	☐ Change ☐ Addition
NAME				NAME	
STREET ADDRESS				STREET ADDRESS	
CITY - ST - ZIP				CITY - ST - ZIP	
TITLE		☐ Delete		TITLE	☐ Change ☐ Addition
NAME				NAME	
STREET ADDRESS				STREET ADDRESS	
CITY - ST - ZIP				CITY - ST - ZIP	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <u><i>Claire A. Titus, Inc. May 1 2006</i></u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					

ATTACHMENT

P O Box 903
Crystal River Fl 34423-0903

Florida Department of State
Division of Corporations
Corporate Records
P O Box 6327
Tallahassee Fl 32314

66023019
#N05000007923

July 3, 2006

Attn; Annual Reports Section

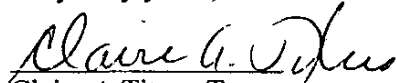
Re; Concerned Citizens of Crystal River Inc.

Dear Sir / Madam:

Please find copy of your letter and copy of 2006 Annual Report for the above captioned Entity. The Federal ID number was inserted in the indicated line.

Sorry for the inconvenience the omission may have caused.

Very truly yours,


/ Claire A Titus, Treasurer

CONCERNED CITIZENS OF CRYSTAL RIVER, INC