

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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FILED
Mar 12, 2011
Secretary of State

Entity Name: NAVARRE COMMUNITY EMERGENCY RESPONSE TEAM, INC.

Current Principal Place of Business:

8476 GORDON GOODIN LN
C/O M. SANDLER
NAVARRE, FL 32566 US

New Principal Place of Business:

Current Mailing Address:

8668 NAVARRE PKWY
362
NAVARRE, FL 32566

New Mailing Address:

FEI Number: 20-3944209

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DOHERTY, THOMAS J
9139 RIDGE DR
NAVARRE, FL 32566 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: C/D
Name: DOHERTY, THOMAS(TJ) MR
Address: 9139 RIDGE DR
City-St-Zip: NAVARRE, FL 32566

Title: D
Name: SANDLER, MICHAEL(MIKE) MR
Address: 1905 WILLIAMS CREEK DR
City-St-Zip: NAVARRE, FL 32566

Title: TD
Name: GREENE, LOUIS(LOU) MR
Address: 6624 TIDEWATER DRIVE
City-St-Zip: NAVARRE, FL 32566

Title: D
Name: NICHOLSON, DON MR.
Address: 7398 BROADMOOR ST
City-St-Zip: NAVARRE, FL 32566

Title: SD
Name: SUSAN, FERSON MRS.
Address: 1724 SEA LARK LN
City-St-Zip: NAVARRE, FL 32566

Title: D
Name: FERSON, ROBERT(BOB) MR
Address: 1724 SEA LARK LN
City-St-Zip: NAVARRE, FL 32566

I hereby 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 all other like empowered.

SIGNATURE: SUSAN FERSON

SD

03/12/2011

Electronic Signature of Signing Officer or Director

Date