

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000000091

FILED
Jan 03, 2007
Secretary of State

Entity Name: CRYSTAL RIVER VILLAGE NEIGHBORHOOD WATCH INC.

Current Principal Place of Business:

1601 SE 8TH AVE LOT 339
CRYSTAL RIVER, FL 34429

New Principal Place of Business:

Current Mailing Address:

1601 SE 8TH AVE LOT 339
CRYSTAL RIVER, FL 34429

New Mailing Address:

FEI Number: 72-1610633

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HENDRICKSON, NORMAN
1601 SE 8TH AVE LOT 339
CRYSTAL RIVER, FL 34429 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: D () Delete
Name: BUSCHBASCHER, DON
Address: 1601 SE 8TH AVE LOT 339
City-St-Zip: CRYSTAL RIVER, FL 34429

Title: D () Delete
Name: JOHNSON, BOB
Address: 1601 SE 8TH AVE LOT 339
City-St-Zip: CRYSTAL RIVER, FL 34429

Title: D () Delete
Name: HOOD, MAL
Address: 1601 SE 8TH AVE LOT 339
City-St-Zip: CRYSTAL RIVER, FL 34429

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: NORMAN, HENDRICKSON
Address: 1601 SE 8TH AVE LOT 339
City-St-Zip: CRYSTAL RIVER, FL 34429

Title: S (X) Change () Addition
Name: HORNER, LEE
Address: 1601 SE 8TH AVE LOT 431
City-St-Zip: CRYSTAL RIVER, FL 34429

Title: T (X) Change () Addition
Name: WOOD, TRUDY
Address: 1601 SE 8TH AVE LOT 523
City-St-Zip: CRYSTAL RIVER, FL 34429

I hereby certify that the information supplied with this filing does not qualify for the 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: NORMAN HENDRICKSON

P

01/03/2007

Electronic Signature of Signing Officer or Director

Date