

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 17, 2007 8:00 am
Secretary of State

04-17-2007 90051 020 ****61.25

DOCUMENT # N06000002811

1. Entity Name

THE CIVILIAN MOUNTED PATROL, INC.



Principal Place of Business

411 N. FRANKLIN STREET
TAMPA FL 33602

Mailing Address

411 N. FRANKLIN STREET
TAMPA FL 33602

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 (10/06)

4. FEI Number

87-0772045

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

HARRISON, CHARLES J
411 N. FRANKLIN STREET
TAMPA FL 33602

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

Charles J. Harrison

CHARLES J. Harrison - President

4/8/07

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

(NOTE: Registered Agent signature required when re-registering)

DATE

**FILE NOW: FEE IS \$61.25
Due By May 1, 2007**

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	P	<input type="checkbox"/> Delete
NAME	HARRISON, CHARLES J	
STREET ADDRESS	11131 WALTER HUNTER ROAD	
CITY - ST - ZIP	LITHIA FL 33547	
TITLE	V	<input checked="" type="checkbox"/> Delete
NAME	WALKER, KEN	
STREET ADDRESS	P.O. BOX 3	
CITY - ST - ZIP	LITHIA FL 33547	
TITLE	S	<input type="checkbox"/> Delete
NAME	ALONSO-HARRISON, DEBBIE	
STREET ADDRESS	11131 WALTER HUNTER ROAD	
CITY - ST - ZIP	LITHIA FL 33547	
TITLE	S	<input type="checkbox"/> Delete
NAME	FREEMAN, BARBARA	
STREET ADDRESS	5039 BOOTH ROAD	
CITY - ST - ZIP	PLANT CITY FL 33565	
TITLE	T	<input checked="" type="checkbox"/> Delete
NAME	COLEMAN, LIL	
STREET ADDRESS	16154 BOYETTE ROAD	
CITY - ST - ZIP	RIVERVIEW FL 33569	
TITLE	S	<input type="checkbox"/> Delete
NAME	MILLER, CONNIE	
STREET ADDRESS	24130 TWISTER LANE	
CITY - ST - ZIP	BROOKSVILLE FL 34602	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE	Vice-President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Carfaro, Rosanna	
STREET ADDRESS	36635 Bianton Road	
CITY - ST - ZIP	Dade City, FL 33523	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE	Treasurer	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Bruntz, Rusty	
STREET ADDRESS	3300 Batten Road	
CITY - ST - ZIP	Brooksville, FL 34602	
TITLE	Sergeant AT Arms	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Wadlington, Nancy Jo	
STREET ADDRESS	2744 E. Knights Griffin Road	
CITY - ST - ZIP	Plant City, FL 33565	

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:

Charles J. Harrison

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/4/07

813-477-0806

Date

Daytime Phone #