

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000002811

FILED  
Jun 30, 2009  
Secretary of State

**Entity Name:** THE CIVILIAN MOUNTED PATROL, INC.

**Current Principal Place of Business:**

411 N. FRANKLIN STREET  
TAMPA, FL 33602

**New Principal Place of Business:**

**Current Mailing Address:**

411 N. FRANKLIN STREET  
TAMPA, FL 33602

**New Mailing Address:**

11131 WALTER HUNTER ROAD  
LITHIA, FL 33547

**FEI Number:** 87-0772045      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

HARRISON, CHARLES J  
411 N. FRANKLIN STREET  
TAMPA, FL 33602 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: P ( ) Delete  
Name: HARRISON, CHARLES J  
Address: 11131 WALTER HUNTER ROAD  
City-St-Zip: LITHIA, FL 33547

Title: VP ( ) Delete  
Name: CAFARO, ROSANNA  
Address: 36635 BLANTON RD  
City-St-Zip: DADE CITY, FL 33523

Title: S ( ) Delete  
Name: ALONSO-HARRISON, DEBBIE  
Address: 11131 WALTER HUNTER ROAD  
City-St-Zip: LITHIA, FL 33547

Title: S ( ) Delete  
Name: FREEMAN, BARBARA  
Address: 5039 BOOTH ROAD  
City-St-Zip: PLANT CITY, FL 33565

Title: T ( ) Delete  
Name: BRUNTY, RUSTY  
Address: 3300 BATTEN RD  
City-St-Zip: BROOKSVILLE, FL 34602

Title: S ( ) Delete  
Name: WADLINGTON, NANCY JO  
Address: 2744 W KNIGHTS GRIFFIN RD  
City-St-Zip: PLANT CITY, FL 33565

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: CHARLES J HARRISON

PRES

06/30/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date