

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000010702

FILED
Apr 14, 2009
Secretary of State

Entity Name: COMMITTEE FOR RESPONSIBLE REPRESENTATION, INC.

Current Principal Place of Business:

7814 SW 47TH COURT
GAINESVILLE, FL 32608

New Principal Place of Business:

14260 WEST NEWBERRY RD
#343
NEWBERRY, FL 32669

Current Mailing Address:

7814 SW 47TH COURT
GAINESVILLE, FL 32608

New Mailing Address:

14260 WEST NEWBERRY RD
#343
NEWBERRY, FL 32669

FEI Number: 20-5709936

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: DCP () Delete
Name: BAINTER, PATRICK
Address: 7814 SW 47TH COURT
City-St-Zip: GAINESVILLE, FL 32608

Title: DST () Delete
Name: JONES, WILLIAM S
Address: 7814 SW 47TH COURT
City-St-Zip: GAINESVILLE, FL 32608

Title: D () Delete
Name: JONES, C.
Address: 7814 SW 47TH COURT
City-St-Zip: GAINESVILLE, FL 32608

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DCP (X) Change () Addition
Name: BAINTER, PATRICK
Address: 6211 SW NW 132ND STREET
City-St-Zip: GAINESVILLE, FL 32653

Title: DST (X) Change () Addition
Name: JONES, WILLIAM S
Address: 9485 NW 23RD PLACE
City-St-Zip: GAINESVILLE, FL 32606

Title: D (X) Change () Addition
Name: JONES, C.
Address: 9485 NW 23RD PLACE
City-St-Zip: GAINESVILLE, FL 32606

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: WILLIAM S. JONES

MR.

04/14/2009

Electronic Signature of Signing Officer or Director

Date