

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000009347

FILED  
Mar 02, 2009  
Secretary of State

**Entity Name:** BEACON WOODS EAST CRIME WATCH, INC.

**Current Principal Place of Business:**

8402 REYNOLDS DR  
HUDSON, FL 34667

**New Principal Place of Business:**

**Current Mailing Address:**

8402 REYNOLDS DR  
HUDSON, FL 34667

**New Mailing Address:**

**FEI Number:** 51-0624956

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

TADLOCK, GERRY  
8402 REYNOLDS DR  
HUDSON, FL 34667 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: PD ( ) Delete  
Name: FANNING, DONA M  
Address: 8629 BRAXTON DR  
City-St-Zip: HUDSON, FL 34667

Title: SD ( ) Delete  
Name: TADLOCK, GERRY  
Address: 8402 REYNOLDS DR  
City-St-Zip: HUDSON, FL 34667

Title: TD ( ) Delete  
Name: CRIBBIS, ANN  
Address: 8217 REYNOLDS DR  
City-St-Zip: HUDSON, FL 34667

**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:

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: DONA M. FANNING

PRES

03/02/2009

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

\_\_\_\_\_  
Date