

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000010635

FILED
Mar 12, 2009
Secretary of State

Entity Name: RESIDENTS FOR COMMUNITY IMPROVEMENTS, INC.

Current Principal Place of Business:

2874 BARTON PLACE
BARTOW, FL 33830

New Principal Place of Business:

Current Mailing Address:

2874 BARTON PLACE
BARTOW, FL 33830

New Mailing Address:

FEI Number: 26-1337444

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRYANT, THOMAS J
4250 S. FLORIDA AVENUE
SUITE 2
LAKELAND, FL 33813 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: PRES () Delete
Name: WASHINGTON, GLORIA R
Address: 2874 BARTON PLACE
City-St-Zip: BARTOW, FL 33830 US

Title: V-P () Delete
Name: THOMAS, CARY L
Address: 2988 SIMPSON DRIVE
City-St-Zip: BARTOW, FL 33830 US

Title: SECR () Delete
Name: ANDERSON, WILLIE L
Address: 2933 DUDLEY DRIVE
City-St-Zip: BARTOW, FL 33830 US

Title: ASEC () Delete
Name: HYMES, EMMA M
Address: 3390 OLD EAGLE LAKE ROAD
City-St-Zip: BARTOW, FL 33830 US

Title: TREA () Delete
Name: CALLOWAY, KENNETH
Address: 2771 FRAZIER STREET
City-St-Zip: BARTOW, FL 33830 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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Name:
Address:
City-St-Zip:

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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: GLORIA R. WASHINGTON

PRES

03/12/2009

Electronic Signature of Signing Officer or Director

Date