

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N07000010797

**FILED**  
**Jan 05, 2012**  
**Secretary of State**

**Entity Name:** CRIME STOPPERS OF CITRUS COUNTY, FLORIDA, INCORPORATED

**Current Principal Place of Business:**

1 DR. MARTIN LUTHER KING JR. AVE  
INVERNESS, FL 34450

**New Principal Place of Business:**

**Current Mailing Address:**

1 DR. MARTIN LUTHER KING JR. AVE  
INVERNESS, FL 34450

**New Mailing Address:**

**FEI Number:** 26-1214225

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

RICHARD WM. WESCH  
1 DR. MARTIN LUTHER KING JR. AVE  
INVERNESS, FL 34450 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: DP  
Name: DILLION, RONALD D SR.  
Address: P.O. BOX 2497  
City-St-Zip: CRYSTAL RIVER, FL 34423

Title: DVP  
Name: STEVEN, GANGI P  
Address: 6327 W.GLYNBORNE LOOP  
City-St-Zip: CRYSTAL RIVER, FL 34429

Title: DS  
Name: RANOUS, ELAINE  
Address: 5960 N. VARINA PT.  
City-St-Zip: CRYSTAL RIVER, FL 34428

Title: DT  
Name: MARTIN, MARY L  
Address: 251 W. HOMEWAY LP.  
City-St-Zip: CITRUS SPRINGS, FL 34434

I hereby 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 all other like empowered.

SIGNATURE: MARY L. MARTIN

TRES

01/05/2012

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

\_\_\_\_\_  
Date