

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000004353

FILED  
Apr 23, 2011  
Secretary of State

**Entity Name:** NORTH PORT NEIGHBORHOOD WATCH, INC.

**Current Principal Place of Business:**

4670 CITY HALL BOULEVARD  
NORTH PORT, FL

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 7613  
NORTH PORT, FL 34290

**New Mailing Address:**

**FEI Number:** 27-0199083

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SHINGLEDECKER, MICHAEL  
3251 DUAR TERR  
NORTH PORT, FL 34291 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: D  
Name: SCHMELKE, RICHARD  
Address: 7035 PARK CIR  
City-St-Zip: NORTH PORT, FL 34286

Title: D  
Name: MESSINESE, RONALD J  
Address: 2153 MINCEY TERRACE  
City-St-Zip: NORTH PORT, FL 34286

Title: D  
Name: PHILBRICK, RITA  
Address: 1150 MCCRORY ST  
City-St-Zip: NORTH PORT, FL 34286

Title: D  
Name: SHINGLEDECKER, MICHAEL  
Address: 3251 DUAR TERR  
City-St-Zip: NORTH PORT, FL 34291

Title: D  
Name: BUCKLIN, JENNIFER  
Address: 4761 THISBE ST  
City-St-Zip: NORTH PORT, FL 34286

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: MICHAEL SHINGLEDECKER

TRES

04/23/2011

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

\_\_\_\_\_  
Date