

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000001723

FILED  
Sep 23, 2012  
Secretary of State

**Entity Name:** CONCERNED CITIZENS OF SOUTH BAY, FLORIDA INC.

**Current Principal Place of Business:**

215 S. W. 6TH AVENUE  
SOUTH BAY, FL 33493

**New Principal Place of Business:**

170 N. W. 11TH AVENUE  
SOUTH BAY, FL 33493

**Current Mailing Address:**

P.O. BOX 873  
SOUTH BAY, FL 33493

**New Mailing Address:**

P.O. BOX 291  
SOUTH BAY, FL 33493

**FEI Number:**

**FEI Number Applied For (X)**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

GITTENS, PETTER  
349 S. E. 3RD STREET  
BELLE GLADE, FL 33430 US

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

MCKELVIN, SALLY  
155 S. W. 11TH AVENUE  
SOUTH BAY, FL 33493 US

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: SALLY MCKELVIN

09/23/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: WALKER, JAVIN  
Address: 230 S. W. 6TH STREET  
City-St-Zip: SOUTH BAY, FL 33493

Title: SD  
Name: HARVEY, RICKEY  
Address: 350 S. E. 3RD STREET  
City-St-Zip: SOUTH BAY, FL 33493

Title: TD  
Name: MCKELVIN, KATISHA  
Address: 170 N. W. 11TH AVE.  
City-St-Zip: SOUTH BAY, FL 33493

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: LATISHA MCKELVIN

T/D

09/23/2012

Electronic Signature of Signing Officer or Director

Date