

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**May 28, 2008 8:00 am**  
**Secretary of State**

05-28-2008 90009 026 \*\*\*\*61.25

**DOCUMENT # N22640**

1. Entity Name

**COMMUNITY CRUSADE AGAINST DRUGS OF SOUTH  
FLORIDA, INC.**



Principal Place of Business

11380 N.W. 27TH AVE  
ROOM #3240  
MIAMI FL 33167  
US

Mailing Address

11380 NW 27TH AVE #3240  
ROOM # 3240  
MIAMI FL 33167  
US

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/07)

4. FEI Number

65-0004103

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MILLER, RICHARD E  
11380 NW 27TH AVE, ROOM 3240  
MIAMI FL 33167**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when constituting)

DATE

**FILE NOW: FEE IS \$61.25  
Due By May 1, 2008**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
P  
MILLER, RICHARD E  
18735 NE 18TH AVE.  
N. MIAMI BEACH FL 33179 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
T  
LINDGREN, KEITH  
104 NE 183RD ST.  
MIAMI FL 33179 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
OM  
ASHLEY, CHERICKA  
1138 NW 27TH AVE #3240  
MIAMI FL 33167 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
ED  
RIDLEY, CHARLES  
11380 NW 27TH AVE 3240  
MIAMI FL 33167 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
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CITY-ST-ZIP  
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☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other lines empowered.

**SIGNATURE:**

**Charles Ridley**

**4/28/08 (305)-237-1634**