FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #

(4)

CRIME STOPPERS OF WEST CENTRAL FLORIDA, INC.

Principal Plac	re of Rusiness	Mailing Address					
C/O ROBERT JERALD P O BOX 5766		C/O ROBERT JERALD P O BOX 5766		3. Date Incorporated or Qualified			
TAMPA FL 336	75	TAMPA FL 33675			09/01/1988 4. FEI Number	Applied For	
2. Principal Place of Business 2a.		2a. Mailing Address	¬ · · · · · ·		59-2908445 5. Certificate of Status Desired . □	\$8.75 Additional Fee Required	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
City & State		City & State		7. Is this nonprofit corporation a homeowners	7. Is this nonprofit corporation a homeowners association?		
Zip 24	Country 25		Countr 30	y 	8. This corporation owes or has paid the curre		
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Ag	jent	
_			81	Name	9		
CARTER, DEBBIE P 2013 SINCLAIR HILLS RD			82		t Address (P.O. Box Number Is Not Acceptable)	· · ·	
LUTZ FL 33549			83				
				City	FL	85 Zip Code	
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.							
SIGNATURE							
12.	Signature, typed or printed name of registered ager OFFICERS AND		: Registered Ag	ent signatur	re required when reinstating) DATE	NOTODO NA LO	
TITLE	DP OFFICERS AND	DELETE	1.1 TITLE		ADDITIONS/CHANGES TO OFFICERS AND D	Change Addition	
NAME	CARTER, DEBBIE		1.2 NAME		-	_ Change Addition	
STREET ADDRESS	2013 SINCLAIR HILLS RD			ADDRESS			
CITY-ST-ZIP	LUTZ FL		1.4 CITY-1				
TITLE	41		2.1 TITLE	34-ER		Change Addition	
NAME	TITA, GREG		2.2 NAME				
STREET ADDRESS	10750 ULMERTON ROAD		2.3 STREE	ADDRESS		:	
CITY-ST-ZIP	LARGO FL		2. 4 CITY-	ST-ZIP			
TITLE	DT	DELETE	3.1 TITLE			Change	
NAME	MERRITT, WALTER		3.2 NAME		CINDY WILSON FIFTH FLOOR COURTHOUSE ANNEX	1	
STREET ADDRESS	500 ZACK ST 610		3.3 STREET	ADDRESS	FIFTH FLOOD COURTHOUSE HAVE		
CITY-ST-ZIP			3.4. CITY-	ST-ZIP	TAMPA, Fr 33602		
TITLE	D	DELETE	4.1 TITLE			Change Addition	
NAME	FOSTER, LANCE		4, 2 NAME				
STREET ADDRESS	619 RIVIERA DRIVE		4.3 STREET	ADDRESS			
CITY-ST-ZIP	TAMPA FL		4.4 CITY - 5	T-ZIP			
TITLE	D DEFENS POR	DELETE	5.1 TITLE		BOB GRIFFIN TREASURER DE	⊈ Change ☐ Addition	
NAME	GRIFFIN, BOB		5.2 NAME		2850 SCHERER DR.		
Street Address	2850 SCHERER DRIVE		5.3 STREET	ADDRESS	ET PETERS BURG, FL		

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

6.3 STREET ADDRESS

5.4 CITY-ST-ZII

6.1 TITLE

6.2 NAME

SIGNATURE:

CITY - ST - ZIP

STREET ADDRESS

TITLE

ST PETERSBURG FL

6501 102ND AVE, N

PINELLAS PARK FL

CLARK, DONNA

DELETE

1-5-98 (83)247-8059

Change

Addition

33716

FILED

Feb 03 1998 8:00am

Secretary of State