

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N28178

1. Entity Name

CRIME STOPPERS OF WEST CENTRAL FLORIDA, INC.

FILED
Jan 12, 2000 8:00 am
Secretary of State

01-12-2000 90039 027 ****61.25

Principal Place of Business

C/O ROBERT JERALD
P O BOX 5766
TAMPA FL 33675

Mailing Address

C/O ROBERT JERALD
P O BOX 5766
TAMPA FL 33675-5766

2. Principal Place of Business

2008 E. 8th Avenue

3. Mailing Address

Suite, Apt. #, etc.

Tampa, FL

City & State

4. FEI Number

59-2908445

Applied For

Not Applicable

Zip

33605

Country

USA

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CARTER, DEBBIE P
2013 SINCLAIR HILLS RD
LUTZ FL 33549

7. Name and Address of New Registered Agent

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.

SIGNATURE

X

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE DP
NAME CARTER, DEBBIE
STREET ADDRESS 2013 SINCLAIR HILLS RD
CITY-ST-ZIP LUTZ FL ☐ Delete

TITLE DVP
NAME TITA, GREG
STREET ADDRESS 10750 ULMERTON ROAD
CITY-ST-ZIP LARGO FL ☐ Delete

TITLE S
NAME WILSON, CINDY
STREET ADDRESS FIFTH FLOOR COURTHOUSE ANNEX
CITY-ST-ZIP TAMPA FL 33602 ☐ Delete

TITLE D
NAME FOSTER, LANCE
STREET ADDRESS 619 RIVIERA DRIVE
CITY-ST-ZIP TAMPA FL ☒ Delete

TITLE T
NAME HEDGES, JOHNNY
STREET ADDRESS 4109 GANDY BLVD
CITY-ST-ZIP TAMPA FL ☐ Delete

TITLE D
NAME CLARK, DONNA
STREET ADDRESS 6501 102ND AVE, N
CITY-ST-ZIP PINELLAS PARK FL ☒ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE Director
NAME Delores Morrill
STREET ADDRESS 411 N. Franklin St.
CITY-ST-ZIP Tampa, FL 33602 ☐ Change ☒ Addition

TITLE Director
NAME Bob Weinhold
STREET ADDRESS 411 N. Franklin St.
CITY-ST-ZIP Tampa, FL 33602 ☐ Change ☒ Addition

TITLE Director
NAME Eric Jackson
STREET ADDRESS 500 Zaack Street
CITY-ST-ZIP Tampa, FL 33602 ☐ Change ☐ Addition

TITLE Director
NAME Keith Bunce
STREET ADDRESS 3010 West Cass Street
CITY-ST-ZIP Tampa, FL 33609 ☐ Change ☒ Addition

TITLE Director
NAME Tom DePolis
STREET ADDRESS 18002 Richmond Place
CITY-ST-ZIP Tampa, FL 33602 ☐ Change ☒ Addition

TITLE Director
NAME Jack Espinosa
STREET ADDRESS 2103 Farwell
CITY-ST-ZIP Tampa, FL 33605 ☐ Change ☒ Addition

12. 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 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 like empowered.

SIGNATURE: X

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-4-00

813-247-805