

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 20, 2004 8:00 am
Secretary of State

04-20-2004 90030 045 ****61.25

DOCUMENT # N33955

1. Entity Name

WITHLACOOCHEE CRIME WATCH, INC.



Principal Place of Business

167 HWY. 40 WEST
P. P. BOX 65
INGLIS FL 34449-0065
US

Mailing Address

167 HWY. 40 WEST
P. P. BOX 65
INGLIS FL 34449-0065
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



MOORE

CR2E037 (11/03)

4. FEI Number

NO-T APPLICABLE

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

REID, SHARON
31 S SCHOOLCRAFT DR
INGLIS FL 34449

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 reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2004

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE: SD
NAME: KUBISTER, SHIRLEY
STREET ADDRESS: 29 MAGNOLIA AVE
CITY - ST - ZIP: YANKEETOWN FL 34498 ☐ Delete

TITLE: TD
NAME: DERIJKE, MARINUS, F.
STREET ADDRESS: 6112 RIVERSIDE DRIVE
CITY - ST - ZIP: YANKEETOWN, FL 34498 ☐ Change ☒ Addition

TITLE: D
NAME: MARSH, SUELLEN
STREET ADDRESS: 35 SHEARER ST
CITY - ST - ZIP: INGLIS FL 34449 ☐ Delete

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

TITLE: VD
NAME: KUBISTEK, ROBERT
STREET ADDRESS: 29 MAGNOLIA AVE
CITY - ST - ZIP: YANKEETOWN FL 34498 ☒ Delete

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

TITLE: TD
NAME: TAYLOR, SALLY
STREET ADDRESS: 10910 SE 201 ST
CITY - ST - ZIP: INGLIS FL 34449 ☒ Delete

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

TITLE: D
NAME: TAYLOR, CHARLES
STREET ADDRESS: 10910 SE 201 ST.
CITY - ST - ZIP: INGLIS FL 3449 ☒ Delete

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

TITLE: D
NAME: TOWNSEND, JOAN
STREET ADDRESS: 30 60TH STREET
CITY - ST - ZIP: YANKEETOWN FL 34498 ☐ Delete

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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Marinus F. De Rijke 4/19/04 (352) 447-6098

Date

Daytime Phone #