## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N34677

Entity Name: COMMUNITY LAW PROGRAM, INC.

FILED Apr 06, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business

501 1ST AVENUE NORTH 501 1ST AVENUE NORTH

SUITE 504 SUITE 512

SAINT PETERSBURG, FL 33701 US SAINT PETERSBURG, FL 33701 US

Current Mailing Address: New Mailing Address:

501 1ST AVENUE NORTH 501 1ST AVENUE NORTH

SUITE 504 SUITE 512

SAINT PETERSBURG, FL 33701 US SAINT PETERSBURG, FL 33701 US

FEI Number: 59-2970727 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

ST PETERSBURG BAR ASSOCIATION
2600 9TH STREET NORTH
2600 9TH STREET NORTH, SUITE 602
ST PETERSBURG FL, FL 33704 US
ST PETERSBURG FL, FL 33704 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: 04/06/2005

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: P/D ( ) Delete Title: P/D (X) Change ( ) Addition

Name: RODGERS, KIMBERLY ESQ. Name: SIVERSTEIN, MURRAY ESQ.
Address: 475 CENTRAL AVE, STE 401 Address: 150 SECOND AVENUE NORTH, SUITE 900

City-St-Zip: ST PETERSBURG, FL 33731 City-St-Zip: ST PETERSBURG, FL 33701

Title: S/D ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 LOPEZ, KAREN ESQ.
 Name:

 Address:
 2461 1ST AVE, N.
 Address:

 City-St-Zip:
 SAINT PETERSBURG, FL 33701
 City-St-Zip:

Title: V/D ( ) Delete Title: V/D (X) Change ( ) Addition Name: BERGMAN, NORA RIVA Name: BERGMAN, NORA RIVA

Address: 2600 9TH ST 6TH FLOOR Address: 2600 9TH ST NORTH, SUITE 602 City-St-Zip: SAINT PETERSBURG, FL 33704 City-St-Zip: SAINT PETERSBURG, FL 33704

Title: T/D ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 BATTAGLIA, BRAIN ESQ.
 Name:

 Address:
 PO BOX 41100
 Address:

 City-St-Zip:
 ST PETERSBURG, FL 33743
 City-St-Zip:

 Name:
 JEFF, GATES
 Name:

 Address:
 545 1ST AVE. N.
 Address:

 City-St-Zip:
 ST. PETERSBURG, FL 33701
 City-St-Zip:

Title: D ( ) Delete Title: D (X) Change ( ) Addition
Name: WORMAN, JEFF ESQ Name: LAZZARA, BELINDA ESQ

Address: 100 SECOND AVENUE SOUTH, SUITE 300S Address: 757 ARLINGTON AVENUE NORTH City-St-Zip: SAINT PETERSBURG, FL 33701 City-St-Zip: SAINT PETERSBURG, FL 33701

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: KIMBERLY RODGERS E/D 04/06/2005

Electronic Signature of Signing Officer or Director

Date