

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jan 28, 2005 8:00 am
Secretary of State

01-28-2005 90031 022 ****69.75

DOCUMENT # N37597

1. Entity Name

WEEKI WACHEE NORTH CRIME WATCH INCORPORATED



Principal Place of Business

12359 PORSCHE LANE
BROOKSVILLE FL 34614

Mailing Address

12359 PORSCHE LANE
BROOKSVILLE FL 34614

50007779

2. Principal Place of Business

12359 Porsche Lane

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Brooksville FLA.

City & State

Zip

Zip

Country

HERAN 200

Country

4. FEI Number

59-2995152

Applied For

Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HARVEY, RICHARD
12359 PORCHE LANE
BROOKSVILLE FL 34614

7. Name and Address of New Registered Agent

Name

RICHARD HARVEY

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

12359 Porsche Lane

City

Brooksville FLA.

FL

Zip Code

34614

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

Richard Harvey

Richard Harvey

1-21-05

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, 2005

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 Pres P
NAME HARVEY, RICHARD
STREET ADDRESS 12359 PORSCHE LA
CITY-ST-ZIP BROOKSVILLE FL 34614 ☐ Delete

TITLE VP
NAME SPIRES, FRANK
STREET ADDRESS 12344 PORCHE LANE
CITY-ST-ZIP BROOKSVILLE FL 34614 ☐ Delete

TITLE Sec S
NAME WINSTANLEY, RONALD
STREET ADDRESS 12354 CORVETTE LA
CITY-ST-ZIP BROOKSVILLE FL 34614 ☐ Delete

TITLE Treas T
NAME ROTUNDA, RICHARD
STREET ADDRESS 10526 SHAWNEE RD.
CITY-ST-ZIP BROOKSVILLE FL 34614 ☐ 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
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CITY-ST-ZIP ☐ Change ☐ Addition

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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:

Richard Harvey

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JANUARY 21-05

Date

Daytime Phone #