2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

Mar 04, 2008 08:00 Al **DOCUMENT # N47672** 1. Entity Name **Secretary of State** CONCERNED CITIZENS FOR CHATMIRE, INC. Principal Place of Business Mailing Address 19789 SW 107TH PL DUNNELLON FL 34432 US P.O. BOX 2371 **DUNNELLON FL 34430** 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suito, Apt. #, etc. 1st MOORE CR2E037 (10/07) City & State City & State Applied For 4. FEI Number 59-3114316 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name LAWRENCE, BARBARA Street Address (P.O. Box Number is Not Acceptable) 19790 SW 107TH LANE **BOYNTON BEACH FL 34437** City 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 (NOTE: Fleg stored Agent signature adquired when reinstating) Signature, typed or printed reasonal registered agent and the ill suplicable. CATE FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. Due By May 1, 2008 Added to Fees Florida Department of State 11) ing ha karangat ra impoti OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. T:TLF Delete TITLE ☐ Change Addition LAWRENCE, BARBARA NAME NAME STREET ADDRESS 19790 SW 107TH LN STREET ADDRESS U00000847379 CITY-ST-7IP **DUNNELLON FL 34432** CITY-ST-ZIP -020 61.25 TITLE ☐ Delate TIFLE ☐ Change Addition WILLIAMS, CYNTHIA A NAME NAME 19920 SW 106TH LN STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **DUNNELLON FL 34432** CITY ST-ZIP ۷D THILE TITLE Change Addition Delete WILLIAMS, CYNTHIA ANITA NAME MAME STREET ADDRESS 19921 SW 107TH PL STREET ADDRESS CITY-ST-7IP **DUNNELLON FL 34430** CITY-ST-ZIP THILE Delete 1164 ☐ Change ☐ Addit:on JOHNSON, LATANIA NAME NAME 11150 ROLLING HILLS #89 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **DUNNELLON FL 34431** CITY - ST - Z:P THILE ☐ Delete Change ☐ Addition COX, ANTOINETTE 19963 SW 109TH PLACE STREET ADDRESS STREET ADDRESS **DUNNELLON FL 34432** CITY-ST-ZIP CHY-ST-ZiP TITLE ☐ Delete HILL ☐ Change ☐ Addition SMITH, ROSETTA V NAME NAME 11225 S.W. 200 AVENUE STREET ADDRESS STREET ADDRESS **DUNNELLON FL 34432** CITY - ST - ZIP CITY-ST-ZIP

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12. Thereby certify that the information supplied with this filing does not quality for the exemptions contained in Section 119, 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