

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N47672

FILED
Mar 30, 2009
Secretary of State

Entity Name: CONCERNED CITIZENS FOR CHATMIRE, INC.

Current Principal Place of Business:

19789 SW 107TH PL
DUNNELLON, FL 34432 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2371
DUNNELLON, FL 34430

New Mailing Address:

FEI Number: 59-3114316

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAWRENCE, BARBARA
19790 SW 107TH LANE
BOYNTON BEACH, FL 34437 US

Name and Address of New Registered Agent:

LAWRENCE, BARBARA
19790 SW 107TH LANE
DUNNELLON, FL 34432 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: _____

03/30/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: LAWRENCE, BARBARA
Address: 19790 SW 107TH LN
City-St-Zip: DUNNELLON, FL 34432

Title: SD () Delete
Name: WILLIAMS, CYNTHIA A
Address: 19920 SW 106TH LN
City-St-Zip: DUNNELLON, FL 34432

Title: VD () Delete
Name: WILLIAMS, CYNTHIA ANITA
Address: 19921 SW 107TH PL
City-St-Zip: DUNNELLON, FL 34430

Title: T () Delete
Name: JOHNSON, LATANIA
Address: 11150 ROLLING HILLS #89
City-St-Zip: DUNNELLON, FL 34431

Title: AT () Delete
Name: COX, ANTOINETTE
Address: 19963 SW 109TH PLACE
City-St-Zip: DUNNELLON, FL 34432

Title: AS () Delete
Name: SMITH, ROSETTA V
Address: 11225 S.W. 200 AVENUE
City-St-Zip: DUNNELLON, FL 34432

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SD (X) Change () Addition
Name: WILLIAMS, CYNTHIA A
Address: 11791 BOSTICK ST
City-St-Zip: DUNNELLON, FL 34431

Title: VD (X) Change () Addition
Name: WILLIAMS, CYNTHIA ANITA
Address: 11791 BOSTICK ST
City-St-Zip: DUNNELLON, FL 34431

Title: T (X) Change () Addition
Name: JOHNSON, LATANGA
Address: 19663 SW 107TH LN
City-St-Zip: DUNNELLON, FL 34431

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: AS (X) Change () Addition
Name: BYRD, CASSANDRA
Address: 19980 SW 108TH LN
City-St-Zip: DUNNELLON, FL 34432

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: BARBARA LAWRENCE

PD

03/30/2009

Electronic Signature of Signing Officer or Director

Date