

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997
AMOUNT DUE ON OR BEFORE 9/17/97: \$61.26 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.26).

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Aug 12 1997 8:00am
Secretary of State

DOCUMENT # N94000001766 (4)

1. Corporation Name

CITIZENS FOR RESPONSIVE GOVERNMENT, INC.



Principal Place of Business Mailing Address
41 N. JEFFERSON ST., SUITE 111 P.O. BOX 1493
PENSACOLA FL 32501 PENSACOLA FL 32597

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 2a. Mailing Address
21 4010 Collingswood Road 26 P. O. Box 10743
Suite, Apt. #, etc. Suite, Apt. #, etc.
22 City & State 27 City & State
23 Pensacola, FL 28 Pensacola, FL
Zip Country Zip Country
24 32514 25 Escambia 29 32524 30 Escambia

3. Date Incorporated or Qualified 3a. Date of Last Report
04/08/1994 05/01/1996
4. FEI Number Applied For
59-3282652 Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent
HUGHES, FRANK S 81 Name
41 N. JEFFERSON ST., SUITE 111 Cobb, Malcolm B.
PENSACOLA FL 32501 82 Street Address (P.O. Box Number is Not Acceptable)
4010 Collingswood Road
83
84 City Pensacola, FL 85 Zip Code 32514

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE *Malcolm B. Cobb* 8/6/97
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD <input checked="" type="checkbox"/> DELETE	1.1 TITLE	PD <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	HUGHES, FRANK S	1.2 NAME	Cobb, Malcolm B.
STREET ADDRESS	4639 D'EVEREUX CIRCLE	1.3 STREET ADDRESS	4010 Collingswood Road
CITY-ST-ZIP	PENSACOLA FL 32504	1.4 CITY-ST-ZIP	Pensacola, FL 32514
TITLE	TD <input type="checkbox"/> DELETE	2.1 TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MCCARTHY, FRANK H	2.2 NAME	Newman, Samuel C.
STREET ADDRESS	2371 BERRYDALE ROAD	2.3 STREET ADDRESS	407 W. Lee Street
CITY-ST-ZIP	PENSACOLA FL 32534	2.4 CITY-ST-ZIP	Pensacola, FL 32501
TITLE	D <input checked="" type="checkbox"/> DELETE	3.1 TITLE	VD <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	TAYLOR, GLORIA B	3.2 NAME	Norris, Charles K.
STREET ADDRESS	7637 BROOK FOREST WAY	3.3 STREET ADDRESS	4400 Bayou Blvd., Suite 31-B
CITY-ST-ZIP	PENSACOLA FL 32514	3.4 CITY-ST-ZIP	Pensacola, FL 32503
TITLE	SD <input checked="" type="checkbox"/> DELETE	4.1 TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HUGHES, JOAN C	4.2 NAME	Taylor, Gloria B.
STREET ADDRESS	4639 D'EVEREUX CIRCLE	4.3 STREET ADDRESS	3813 Andrew Jackson Drive
CITY-ST-ZIP	PENSACOLA FL 32504	4.4 CITY-ST-ZIP	Pace, FL 32591
TITLE	D <input checked="" type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TAYLOR, RODNEY K	5.2 NAME	
STREET ADDRESS	7637 BROOK FOREST WAY	5.3 STREET ADDRESS	
CITY-ST-ZIP	PENSACOLA FL 32514	5.4 CITY-ST-ZIP	
TITLE	VD <input checked="" type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VOLZ, DAVID	6.2 NAME	
STREET ADDRESS	1750 YATES AVENUE	6.3 STREET ADDRESS	
CITY-ST-ZIP	PENSACOLA FL 32503	6.4 CITY-ST-ZIP	

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE *Malcolm B. Cobb* 8/6/97
Malcolm B. Cobb 850-476-4474

CR2E037 (4/97)