2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2004
Secretary of State

DOCUMENT# N94000003940

Entity Name: BARTLETT PARK CRIME WATCH AND NEIGHBORHOOD ASSOCIATION, INC.

Current Principal Place of Business:

642 22ND AVE S
SAINT PETERSBURG, FL 33701 US

New Principal Place of Business:

Current Mailing Address:

642 22ND AVE S
SAINT PETERSBURG, FL 33701 US

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TITO, THOMAS
622 12TH AVE. SO.
SAINT PETERSBURG, FL 33701 US

Name and Address of New Registered Agent:

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: _____
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: SD ( ) Delete
Name: GAVIN, RUTHA
Address: 650 NEWTON AVE. SO.
City-St-Zip: SAINT PETERSBURG, FL 33701

Title: VP ( ) Delete
Name: BEELER, BETTY
Address: 875 13TH AVE. SO.
City-St-Zip: ST. PETERSBURG, FL 33701

Title: P ( ) Delete
Name: TITO, THOMAS
Address: 622 12TH AVE. SO.
City-St-Zip: SAINT PETERSBURG, FL 33701

Title: TD ( ) Delete
Name: PAYNE, CHARLES M
Address: 422 15TH AVE SO.
City-St-Zip: ST. PETERSBURG, FL 33701

Title: T ( ) Delete
Name: WILLIAMS, AODIE
Address: 830 NEWTON AVENUE S
City-St-Zip: SAINT PETERSBURG, FL 33701

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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: THOMAS TITO PRES 04/28/2004
Electronic Signature of Signing Officer or Director — Date