## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N94000003940

FILED Jun 17, 2005 Secretary of State

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

**Current Principal Place of Business: New Principal Place of Business:** 642 22ND AVE S 642 22ND AVE S SAINT PETERSBURG, FL 33701 US COMMUNITY RESOURCE CENTER SAINT PETERSBURG, FL 33705 **Current Mailing Address:** New Mailing Address: 642 22ND AVE S 642 22ND AVE S SAINT PETERSBURG, FL 33705 SAINT PETERSBURG, FL 33701 US US FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( ) In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: TITO, THOMAS 622 12TH AVE. SO SAINT PETERSBURG, FL 33701 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition GAVIN. RUTHA Name: Name: 650 NEWTON AVE. SO. Address: Address: City-St-Zip: SAINT PETERSBURG, FL 33701 City-St-Zip: Title: () Delete Title: VΡ (X) Change ( ) Addition BEELER, BETTY Name: THOM, DANIEL Name: Address: 875 13TH AVE. SO. Address: 642 22ND AVE S City-St-Zip: ST. PETERSBURG, FL 33701 City-St-Zip: ST. PETERSBURG, FL 33705 Title: () Delete Title: () Change () Addition TITO, THOMAS Name: Name: Address: 622 12TH AVE. SO. Address: City-St-Zip: SAINT PETERSBURG, FL 33701 City-St-Zip: Title: TD (X) Delete Title: () Change () Addition Name: PAYNE, CHARLES M Name: Address: 422 15TH AVE SO. Address: City-St-Zip: ST. PETERSBURG, FL 33701 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition WILLIAMS, AODIE WILLIAMS, ADDIE Name: Name: 830 NEWTON AVENUE S 830 NEWTON AVENUE S Address: Address: City-St-Zip: SAINT PETERSBURG, FL 33701 City-St-Zip: SAINT PETERSBURG, FL 33701

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 P 06/17/2005