

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000003940

FILED
Apr 12, 2012
Secretary of State

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

Current Principal Place of Business:

642 22ND AVE SOUTH
BP COMMUNITY RESOURCE CENTER
SAINT PETERSBURG, FL 33705 US

New Principal Place of Business:

Current Mailing Address:

642 22ND AVENUE SOUTH
C/O BARTLETT PARK COMMUNITY RESOURCE CTR
SAINT PETERSBURG, FL 33705 US

New Mailing Address:

642 22ND AVE SOUTH
BP COMMUNITY RESOURCE CENTER
SAINT PETERSBURG, FL 33705 US

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

Name and Address of Current Registered Agent:

TITO, TOM
642 22ND AVE SOUTH
SAINT PETERSBURG, FL 33705 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: P
Name: HAYES, BETTY
Address: 642 22ND AVE SOUTH
City-St-Zip: SAINT PETERSBURG, FL 33705

Title: VP
Name: TITO, TOM
Address: 642 22ND AVE SOUTH
City-St-Zip: SAINT PETERSBURG, FL 33705

Title: D
Name: KELLY, WILEEN
Address: 642 22ND AVE SOUTH
City-St-Zip: SAINT PETERSBURG, FL 33701

Title: TD
Name: GAVIN, RUTHA
Address: 642 22ND AVENUE S
City-St-Zip: SAINT PETERSBURG, FL 33705

Title: S
Name: HILDERBRAN, ANDREA
Address: 642 22ND AVE SOUTH
City-St-Zip: SAINT PETERSBURG, FL 33705

I hereby 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 all other like empowered.

SIGNATURE: THOMAS TITO

VP

04/12/2012

Electronic Signature of Signing Officer or Director

Date