

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 04, 2008 08:00 AM
Secretary of State

DOCUMENT # N94000004992

1. Entry Name

PRISTINE PLACE CRIMEWATCH, INC.



Principal Place of Business

Mailing Address

4008 LITTLE LEAF CT
SPRING HILL FL 34609
US

4008 LITTLE LEAF CT
SPRING HILL FL 34609
US



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/07)

4. FEI Number

65-0535870

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LESSNER, LOU
4016 LITTLELEAF CT
SPRING HILL FL 34609

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: New Agent signature required when registering)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	TR	<input type="checkbox"/> Delete
NAME	HESS, ROBERT	
STREET ADDRESS	4007 LITTLELEAF CT	
CITY-STATE-ZIP	SPRING HILL FL 34609	
TITLE	TR	<input type="checkbox"/> Delete
NAME	HIRSCHBERG, MARK	
STREET ADDRESS	4026 CEDAR CREST LOOP	
CITY-STATE-ZIP	SPRING HILL FL 34609	
TITLE	T	<input type="checkbox"/> Delete
NAME	CATANIA, THOMAS	
STREET ADDRESS	4008 LITTLE LEAF CT	
CITY-STATE-ZIP	SPRING HILL FL 34609	
TITLE	D	<input type="checkbox"/> Delete
NAME	RULAND, RICHARD	
STREET ADDRESS	14262 CORNWALL LN	
CITY-STATE-ZIP	SPRING HILL FL 34609	
TITLE	P	<input type="checkbox"/> Delete
NAME	LESSNER, LOU	
STREET ADDRESS	4016 LITTLELEAF CT	
CITY-STATE-ZIP	SPRING HILL FL 34609	
TITLE	VP	<input type="checkbox"/> Delete
NAME	ALESKI, MARTY	
STREET ADDRESS	14148 CORNWALL LN	
CITY-STATE-ZIP	SPRING HILL FL 34609	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	

000000816327
02/14/08-80045-023 61.25

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Thomas Catania* **THOMAS CATANIA** 1-31-08 352-835-3520