2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

	ANNUAL R		FILED					
DOCUMENT # N95000004599 1. Entity Name					May 08, 2006 –08:00 A Secretary of State			
RICHMON INC.	ID HEIGHTS NEIGHBORHO	OOD CRIME WATCH,			Secreta	ily Ol	State	
Principal Place of Business		Mailing Address						
10370 SW 149TH TERR MIAMI FL 33176		10370 SW 149TH TERR MIAMI FL 33176						
2. Principal Place of Business		3. Mailing Address			#	1 E4221 OX10 IEIIE 1011	101 0) (004	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		1st MO	1st MOORE _ CR2E037 (10/05)			
City & State		City & State		4. FEI Number	65-0610590 Not Applicable			
Zip	Country	Zıp	Country	5. Certificate of S		\$8.75 Addi Fee Required		
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent Name				
BALDWIN, GEORGE				Street Address (P.O. Box Number is Not Acceptable)				
103	70 SW 149TH TERR		Street Addres		(P.O. Box Number is Not Acceptable)			
MIAMI FL 33176								
			City	City FL Zip Code				
	named entity submits this statement floors of registered agent.	or the purpose of changing its re	gistered office or re	egistered agent, or both, in	the State of Florida. I am	n familiar with, a	and accept	
the obligat	ions or registered agent.	4.0						
SIGNATURE	Signature, typed or Amileo name of regulatered agen	alder (NOTE:	Parelured Anunt constant	e required when reinstating)	MAY 3 AL	1-2006	-	
and grade of some the first of the first	Signalare, typica or permise marise or registrated agen	en Characte	egisibleo Ageni alguatile	- Colored Williams	•	21		
FILE NOW: FEE IS \$61.25 Due By May 1, 2006 9. Election Campaign File Trust Fund Contribution				\$5.00 May Be Added to Fees	Make Ched Florida Depa	Professional Application of the Contract of th		
10. OFFICERS AND DIRECTORS		11.	ADDITIONS/CHANG	GES TO OFFICERS AND D	A half after services and	10		
TITLE	PD	☐ Delete	TITLE			Change	☐ Addition	
NAME . STREET ADDRESS	BALDWIN, GEORGE 10370 SW 149TH TERR		NAME STREET ADDRESS					
CITY-ST-ZIP	MIAMI FL 33176		CITY-ST-ZIP	(m _e prim	<u> </u>	on at an		
TITLE	VD	☐ Delete	TITLE		./20/08-80009- 0		Addition	
NAME STREET ADDRESS	STEVENS, OLA 14401 BOGGS DR.		NAME . STREET ADDRESS					
CITY-ST-ZIP	MIAMI FL 33176		CITY-ST-ZIP				:	
TITLE	SD	Delete	. IIILE	.,		- Change	☐ Addition	
NAME	GIBSON, HERMINE		NAME STREET ADDRESS					
STREET ADDRESS CITY-ST-ZIP	13621 MONROE ST. MIAMI FL 33176		CITY-ST-ZIP					
TITLE	SD	☐ Delete	TITLE	• • • • • • • • • • • • • • • • • • • •		☐ Change	Addition	
NAME	MCCOY, ARSIMMER		NAME					
STREET ADDRESS CITY-ST-ZIP	11260 SW 138TH TERR MIAMI FL 33176		STREET ADDRESS CITY-ST-ZIP	•				
TITLE	TD	☐ Delete	TITLE			☐ Change	Addition	
NAME	DANIELS, TOMMIE C		NAME					
STREET ADDRESS CITY-ST-ZIP	14215 JACKSON ST MIAMI FL 33176		STREET ADDRESS CITY-ST-ZIP					
TITLE	MINIMITE SOLVE	Delete	TITLE			☐ Change	Addition	
NAME		□ D€I€Æ	NAME					
STREET ADDRESS			STREET ADDRESS					
CITY-ST-ZIP			CITY-ST-ZIP					

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 eath; 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.