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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT # N9500005209 (0)

NEIGHBORS AGAINST CRIME, INC.

	ndons Against Chime, in	10.				H BIAII BAHA BBIJI	48 00 88 00 83 00 3 000	Hara bana dan 1881
Principal Place	e of Business	Mailing Address						
1310 E. PROSPECT AVE. MELBOURNE FL 32901		1310 E. PROSPECT AVE. MELBOURNE FL 32901						
2 Principal D	too of Davi			3.	Date Incorporated 10/30/199		3a. Date of La	ast Report
2. Principal Place of Business 21 Community Relations (1/26)				4.	FEI Number			Applied For
0.3- 1-1.8								Not Applicable
22 1700 W. New Haven Avez7				5.	5. Certificate of Status Desired		\$8.75 Additional Fee Required	
23 Mell	Dourne, Fi	City & State		6.	Election Campaign Trust Fund Contribu		□ \$5	.00 May Be ded to Fees
^{Zip} 3290	25 Brevard	Ζiρ 29	Country	8.	This corporation ha	s liability for int	tangible tax under	s. 199.032,
	9. Name and Address of Curren		30	i	Florida Statutes		Yes 🖳 No	
		- Trogration rigorit	81 Nam		Name and Addres	s of New Re	gistered Agent	
FLEY F	EDMOND L							
	UTH SCOTT STREET		82 Stree	et Address (P.	O. Box Number is N	ot Acceptable)		
	URNE FL 32901		63					
17122001	DINIC I E OZBO I							
			84 City				 85	Zip Code
11. Pursuant t	o the provisions of Sections 617,0502 ed agent, or both, in the State of Florid	and 617.1508. Florida Statute	es the above-named	comprehen e	diam're the same		FL:	•
or register familiar wit	ed agent, or both, in the State of Florid th, and accept the obligations of, Section	la. Such change was authorize	ed by the corporation	's board of dir	ubmits this statemen rectors. I hereby acc	t for the purpo ept the appoin	se of changing its	registered offic
ican mich Tric	and accept the obligations of, Section	on 617.0503, Florida Statutes			,	opt the appoint	and a register	od agent. Fam
CIONIATURE								
SIGNATURE	Signature, typed or printed name of registered adont a	and title Cauplicable (NC)	Ti Downtood A	· - ·				
	Signature, typed or printed name of registered agent a OFFICERS AND		TE Registered Agent signature			FO TO OFCIO	DATE	
12.	Signature, typed or printed nume of registered agent of OFFICERS AND DP		13.		ristating) ADDITIONS/CHANG	ES TO OFFICE	RS AND DIRECT	
12.	OFFICERS AND	DIRECTORS	13. 1.1 TULE			ES TO OFFICI		
12. DILE	OFFICERS AND DP MEEHAN, KATHLEEN H	DIRECTORS	13. 1.1 TÜLE 12 NAME			ES TO OFFICI	RS AND DIRECT	
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SIGNATURE: # HULLE HULLE 4/29/96 (407) 984.

SIGNATURE: # Date AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR 4/29/96 (407) 984.

E027 (19/05)