

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N95000005209

1. Entity Name

NEIGHBORS AGAINST CRIME, INC.

Principal Place of Business

COMMUNITY RELATIONS CTR
1700 W NEW HAVEN AVE ROOM 141
MELBOURNE FL 32904
US

Mailing Address

1310 E. PROSPECT AVE.
MELBOURNE FL 32901

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

ELEY, EDMOND L
111 SOUTH SCOTT STREET
MELBOURNE FL 32901

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of New Registered Agent

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE DV
NAME MEEHAN, KATHLEEN H ☐ Delete
STREET ADDRESS 1310 E. PROSPECT AVE.
CITY-ST-ZIP MELBOURNE FL 32901

TITLE DP
NAME DOWNS, JEFF ☒ Delete
STREET ADDRESS 3376 FAN PALM BLVD
CITY-ST-ZIP MELBOURNE FL 32901

TITLE DT
NAME LO GALBO, FRANK ☒ Delete
STREET ADDRESS 2551 APPALACHIAN DRIVE
CITY-ST-ZIP MELBOURNE FL 32935

TITLE DS
NAME SADOWSKI, DANA ☒ Delete
STREET ADDRESS 1714 BRUMAN TERR
CITY-ST-ZIP MELBOURNE FL 32935

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE DP
NAME MAILHOT, GINA ☒ Change ☐ Addition
STREET ADDRESS 4150 BAHAMA AVE.
CITY-ST-ZIP MELBOURNE, FL 32901

TITLE DT
NAME MASSIMINI, JOSEPH ☒ Change ☐ Addition
STREET ADDRESS 1583 ALBERT DR.
CITY-ST-ZIP MELBOURNE, FL 32935

TITLE DS
NAME ZAMBARAS, MELODY ☒ Change ☐ Addition
STREET ADDRESS 3033 COLLEGE WOOD DRIVE
CITY-ST-ZIP MELBOURNE, FL 32935

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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: *Joseph Massimini*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-20-01 321-242-2306
Date Daytime Phone #

FILED
Apr 04, 2001 8:00 am
Secretary of State

04-04-2001 90101 029 ****61.25



DO NOT WRITE IN THIS SPACE

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CR2E037 (10/00)