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Apr 20 1998 8:00am
Secretary of State

NONPROFIT CORPORATION, ANNUAL REPORT
1998

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N96000001666 (4)

1. Corporation Name
FLORIDA CRIME PREVENTION FEDERATION, INC.

Principal Place of Business / Mailing Address
12040 S.W. 26 Ct.
DAVIE, FL 33330

3. Date Incorporated or Qualified: 03/22/1996

4. FEI Number: 65-0670881 — Applied For / Not Applicable

2. Principal Place of Business — 21
Suite, Apt. #, etc. — 22
City & State — 23
Zip — 24 — Country — 25

2a. Mailing Address — 26
Suite, Apt. #, etc. — 27
City & State — 28
Zip — 29 — Country — 30

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

7. Is this nonprofit corporation a homeowners association? ☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30 ☐ Yes ☒ No

9. Name and Address of Current Registered Agent
JACK C. DOWNS
12040 S.W. 26 Ct.
DAVIE, FL 33330

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City — FL — 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: JACK C. DOWNS — Jack C. Downs — 4/1/98
Signature, typed or printed name of resident agent and title, if applicable — (NOTE: Registered Agent signature required when reinstating) — DATE

12. OFFICERS AND DIRECTORS

TITLE	FIRST VICE PRESIDENT	☒ DELETE
NAME	MARK COWART	
STREET ADDRESS	12040 SW 26 Ct.	
CITY-ST-ZIP	DAVIE, FL 33330	
TITLE "D"	PRESIDENT	☐ DELETE
NAME	JACK C. DOWNS	
STREET ADDRESS	12040 S.W. 26 Ct.	
CITY-ST-ZIP	DAVIE, FL. 33330	
TITLE "D"	VICE PRESIDENT	☐ DELETE
NAME	ALEX PERRI	
STREET ADDRESS	6200 S.W. 16 Ct.	
CITY-ST-ZIP	POMPANO BEACH, FL 33068	
TITLE "T"	SECRETARY	☐ DELETE
NAME	NEAL BLAUSTEIN	
STREET ADDRESS	7400 N.W. 4 PL. #104	
CITY-ST-ZIP	MARGATE, FL. 33063	
TITLE "T"	TREASURER	☐ DELETE
NAME	JACK C. DOWNS	
STREET ADDRESS	12040 S.W. 26 Ct.	
CITY-ST-ZIP	DAVIE, FL 33330	
TITLE "T"	TRUSTEE	☐ DELETE
NAME	GINGER DOWNS	
STREET ADDRESS	12040 S W 26 Ct.	
CITY-ST-ZIP	DAVIE, FL. 33330	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE		☐ Change ☐ Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME	300002493453	
5.3 STREET ADDRESS	-04/20/98--01006--027	
5.4 CITY-ST-ZIP	***70.00	
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

4-20 JR

CR2E037 (10/97)

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Jack C. Downs — JACK C. DOWNS — 4/1/98 — 954-474-1644
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #