2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # N97000004200

1. Entity Name

CUTLER RIDGE CONCERNED CITIZENS, INC.



FILED
Mar 26, 2007 08:00 AM
Secretary of State

Principal Place of Business

CHI 204 TERRACE

10370 SW 201 TERRACE MIAMI, FL 33189 Mailing Address

10370 SW 201 TERRACE MIAMI, FL 33189



03142007 No Chg-NP

CR2E037 (4/06)

4. FEI Number 65-0807200

Applied For Not Applicable

Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Amnt

SHIVER, JAMES 20220 SW 105 AVENUE MIAMI, FL 33189

THEE NAME STREET ADDRESS CITY-ST-ZIP

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MIAMI, FL 33189			IN THIS SPACE			
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: Registered Agent signature required when reinstating) DATE						
	Filing Fee is \$61.25 Due by May 1, 2007	9. Election Campaign Finant Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SHIVER, J 20220 SW 105 AVE MIAMI, FL 33189					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T PASCHAL, CARL 20223 SW 103 AVE MIAMI, FL 33189				000000680291 04/03/07-80071-019 61.25	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SHIVER, BETTY 20220 SW 105 AVE MIAMI, FL 33189			DO NOT WRITE IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HIERS, LINDA 10530 SW 204 TERR MIAMI, FL 33189					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D AMBROSA, FREDDY 20101 CORAL SEA RD MIAMI, FL 33189					

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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.

& James & Edund