

# NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 17, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # N98000004748**

1. Entity Name

CRIME STOPPERS OF LEVY COUNTY, FLORIDA, INC.



Principal Place of Business

9150 NE 80 AVE  
BRONSON, FL 32621

Mailing Address

PO BOX 1846  
BRONSON, FL 32621



01122006 No Chg-NP

CR2E037 (11/05)

4. FEI Number

59-3527627

Applied For

Not Applicable

5. Certificate of Status Desired



**\$8.75** Additional  
Fee Required

5. Name and Address of Current Registered Agent

FENDER, BETTY  
320 SOUTHEAST 4TH DRIVE  
WILLISTON, FL 32696

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: Betty Fender

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

Betty Fender, Treas. Jan 12, 2006

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25**  
**Due by May 1, 2006**

9. Election Campaign Financing  
Trust Fund Contribution.



**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	SPRAGUE, PAULA
STREET ADDRESS	PO DRAWER 1719
CITY-ST-ZIP	BRONSON, FL 32621
TITLE	TD
NAME	FENDER, BETTY
STREET ADDRESS	320 SE 4TH DRIVE
CITY-ST-ZIP	BRONSON, FL 32621
TITLE	D
NAME	KOCHER, KEITH
STREET ADDRESS	6390 N.E. 185TH TERRACE
CITY-ST-ZIP	WILLISTON, FL 32696
TITLE	SD
NAME	KELLOGG, VICKI
STREET ADDRESS	4350 NE 107 CT.
CITY-ST-ZIP	BRONSON, FL 32621
TITLE	D
NAME	KELLOGG, TOM
STREET ADDRESS	4350 NE 107 CT
CITY-ST-ZIP	BRONSON, FL 32621
TITLE	VPD
NAME	HAINES, SUSAN
STREET ADDRESS	PO BOX 1846
CITY-ST-ZIP	BRONSON, FL 32621

U00000390001  
01/23/06-80007-024 61.25

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.

SIGNATURE: Betty Fender, Treas. Betty Fender Jan 12, 2006 (352) 528-4311

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #