

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 14, 2001 8:00 am
Secretary of State

05-14-2001 90102 025 ****61.25

DOCUMENT # N99000002408

1. Entity Name

COMMITTED CITIZENS OF WAVERLY, INC.

Principal Place of Business

255 AVE A
 WAVERLY FL 33877

Mailing Address

PO BOX 658
 WAVERLY FL 33877-9658

2. Principal Place of Business

3. Mailing Address

P.O. Box 658

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

WAVERLY, FL.

4. FEI Number

59-3613344

Applied For

Not Applicable

Zip

Country

Zip

Country

33877-0658

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CARLTON, LARRY E
 255 AVENUE A
 WAVERLY FL 33877-0197

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Delete
 NAME CARLTON, LATRYNA
 STREET ADDRESS 255 AVE A
 CITY-ST-ZIP WAVERLY FL 33877

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

TITLE VPD ☒ Delete
 NAME CARLTON, LARIZ
 STREET ADDRESS 255 AVE A
 CITY-ST-ZIP WAVERLY FL 33877

TITLE VPD ☒ Change ☐ Addition
 NAME LARRY CARLTON
 STREET ADDRESS 255 AVENUE A
 CITY-ST-ZIP WAVERLY, FL 33877-0197

TITLE SD ☒ Delete
 NAME GREEN, LASHAWN
 STREET ADDRESS 2411 APPALOOSA RD
 CITY-ST-ZIP LAKE WALES FL 33853

TITLE SD ☒ Change ☐ Addition
 NAME TONETTE ROBINSON
 STREET ADDRESS 232 WAVERLY LOOP
 CITY-ST-ZIP WAVERLY, FL 33877

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE TD ☐ Change ☒ Addition
 NAME DENISE PALMER
 STREET ADDRESS 6281 WAVERLY ROAD
 CITY-ST-ZIP WAVERLY, FL 33877

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE ☐ Delete
 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: *Larry E. Carlton* **LARRY E. CARLTON** 4-18-01 863-439-9407
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (10/00)