

**2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
May 28, 2005  
Secretary of State**

DOCUMENT# N99000002408

Entity Name: COMMITTED CITIZENS OF WAVERLY, INC.

**Current Principal Place of Business:**

255 AVE A  
WAVERLY, FL 33877

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 658  
WAVERLY, FL 338770658

**New Mailing Address:**

FEI Number: 59-3613344      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

CARLTON, LARRY E  
255 AVENUE A  
WAVERLY, FL 338770197 US

**Name and Address of New Registered Agent:**

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD      ( ) Delete  
Name: CARLTON, LATRYNA  
Address: 255 AVE A  
City-St-Zip: WAVERLY, FL 33877

Title: VPD      ( ) Delete  
Name: CARLTON, LARRY  
Address: 255 AVENUE A  
City-St-Zip: WAVERLY, FL 338770197

Title: SD      ( ) Delete  
Name: SCOTT-STATON, LUTISHA  
Address: 707 3RD AVENUE  
City-St-Zip: WAVERLY, FL 33877

Title: TD      ( ) Delete  
Name: PALMER, DENISE  
Address: 6281 WAVERLY RD  
City-St-Zip: WAVERLY, FL 33877

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LARRY E CARLTON

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

VPD

05/28/2005

\_\_\_\_\_  
Date