

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000002408

FILED
May 28, 2005
Secretary of State

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:

Name and Address of New Registered Agent:

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

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

VPD

05/28/2005

Electronic Signature of Signing Officer or Director

Date