2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000004223

FILED Feb 19, 2009 Secretary of State

Entity Name: SANTA ROSA COUNTY CRIME STOPPERS, INC.

Current Principal Place of Business: New Principal Place of Business:

5755 EAST MILTON ROAD MILTON, FL 32570

Current Mailing Address: New Mailing Address:

PO BOX 7129

MILTON, FL 32572 US

FEI Number: 59-3587063 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

NITTERAUER, JIM ROCHE, DEBORAH H

3 W. GARDEN STREET, SUITE 326 4211 JERRY MAYGARDEN ROAD PENSACOLA, FL 32502 US PENSACOLA, FL 32504 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: DEBORAH H. ROCHE 02/19/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition

 Name:
 NITTERAUER, JIM
 Name:
 PRANGE, WILLIAM

 Address:
 3 W. GARDEN ST., STE 326
 Address:
 5887 BAY WIND DRIVE

 City-St-Zip:
 PENSACOLA, FL 32501
 City-St-Zip:
 GULF BREEZE, FL 32561

Title: VP () Delete Title: TD (X) Change () Addition Name: PRANGE, WILLIAM Name: ROCHE, DEBORAH H

Address: 5887 BAY WIND DR Address: 4211 JERRY MAYGARDEN RD City-St-Zip: GULF BREEZE, FL 32561 City-St-Zip: PENSACOLA, FL 32504

Title: TD (X) Delete Title: () Change () Addition

 Name:
 ROCHE, DEBORAH
 Name:

 Address:
 510 JAMES RIVER RD
 Address:

 City-St-Zip:
 GULF BREEZE, FL 32561
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: DEBORAH H. ROCHE TD 02/19/2009