

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000004695

FILED
Apr 01, 2004
Secretary of State**Entity Name:** CITIZENS ON PATROL OF TALLAHASSEE LEON COUNTY, INC.**Current Principal Place of Business:**1350 E. TENNESSEE ST
BLDG E APT 101
TALLAHASSEE, FL 30308**New Principal Place of Business:****Current Mailing Address:**1350 E. TENNESSEE ST
BLDG E APT 101
TALLAHASSEE, FL 30308**New Mailing Address:****FEI Number:** 59-2700189**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**SMITH, BRIAN
1350 EAST TENNESSEE STREET
BLDG E-4 #101
TALLAHASSEE, FL 30308 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:** ED () Delete
Name: WARREN, WAYNE
Address: 1350 E TENNESSEE ST E-4 #101
City-St-Zip: TALLAHASSEE, FL 32308**Title:** ST () Delete
Name: HANSARD, MARGARET
Address: 1350 E TENNESSEE ST E-4 #101
City-St-Zip: TALLAHASSEE, FL 32308**Title:** D () Delete
Name: DEPUY, C.E.
Address: LEON COUNTY COURT HOUSE
City-St-Zip: TALLAHASSEE, FL 32301**Title:** D () Delete
Name: LOTAIN, ROBIN
Address: 1213 HALIFAX CT
City-St-Zip: TALLAHASSEE, FL 32308**Title:** H () Delete
Name: HELMS, FRANK
Address: 1940 THOMASVILLE ROAD
City-St-Zip: TALLAHASSEE, FL 32303**Title:** M () Delete
Name: MACLAUCHLIN, REID
Address: 3700 WOODHILL DRIVE
City-St-Zip: TALLAHASSEE, FL 32303**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
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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: WAYNE WARREN

ED

04/01/2004

Electronic Signature of Signing Officer or Director

Date