

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000006993

FILED  
Mar 31, 2011  
Secretary of State

**Entity Name:** KERBO COALITION OF CONCERNED CITIZENS, INC.

**Current Principal Place of Business:**

338 S. W. LAKE STREET  
MAYO, FL 32066

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 281  
MAYO, FL 32066

**New Mailing Address:**

**FEI Number:** 59-3595574

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MURPHY, ANN  
338 S.W. LAKE STREET  
MAYO, FL 32066 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  
**Name:** MCGREW, TAYLOR  
**Address:** P.O. BOX 674  
**City-St-Zip:** MAYO, FL 32066

**Title:** V  
**Name:** WATKINS, GWEN  
**Address:** P.O. BOX 933  
**City-St-Zip:** MAYO, FL 32066

**Title:** V  
**Name:** HAMILTON, DEBRA  
**Address:** P.O. BOX 221  
**City-St-Zip:** MAYO, FL 32066

**Title:** T  
**Name:** MURPHY, ANN  
**Address:** P.O. BOX 281  
**City-St-Zip:** MAYO, FL 32066

**Title:** TD  
**Name:** MIDDLETON, PAMELA  
**Address:** P.O. BOX 161  
**City-St-Zip:** MAYO, FL 32066

**Title:** SD  
**Name:** REID, SYLVIA  
**Address:** P.O. BOX 554  
**City-St-Zip:** MAYO, FL 32066

I hereby 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 all other like empowered.

**SIGNATURE:** TAYLOR MCGREW

PRES

03/31/2011

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

\_\_\_\_\_  
Date