

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N07000000656

**Entity Name:** POWELL SUBDIVISION NEIGHBORHOOD WATCH PROGRAM, INC.**FILED**  
**Apr 05, 2017**  
**Secretary of State**  
**CC8902719693****Current Principal Place of Business:**3318 JAMES STREET  
MELBOURNE, FL 32901**Current Mailing Address:**P. O. BOX 061612  
PALM BAY, FL 32906-1612**FEI Number: 76-0794652****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**BARTELL, RALPHALETTE  
3318 JAMES STREET  
MELBOURNE, FL 32901 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: RALPHALETTE BARTELL****04/05/2017**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	PRESIDENT
Name	BARTELL, RALPHALETTE
Address	3318 JAMES STREET
City-State-Zip:	MELBOURNE FL 32901
Title	SECRETARY
Name	DEHART, MARGARET
Address	2231 PELHAM ST., NE
City-State-Zip:	PALM BAY FL 32905
Title	SERGEANT OF ARMS
Name	SIMMS-FARRIE, LARONDALYN
Address	3349 ALDRIN STREET
City-State-Zip:	MELBOURNE FL 32901

Title	VP
Name	BAKER, MARY
Address	1401 BAKER DRIVE
City-State-Zip:	MELBOURNE FL 32901
Title	TREASURE
Name	DAVIS, PEGGY
Address	1310 BAKER DRIVE
City-State-Zip:	MELBOURNE FL 32901
Title	CHAPLIN
Name	MCGLOWN, SUSIE
Address	2207 MONROE STREET
City-State-Zip:	PALM BAY FL 32905

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: PEGGY DAVIS****TREASURER****04/05/2017**

Electronic Signature of Signing Officer/Director Detail

Date