

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

DOCUMENT# N28178

**Entity Name:** CRIME STOPPERS OF TAMPA BAY, INC.

**Current Principal Place of Business:**

C/O DEBBIE CARTER  
2008 E 8TH AVENUE  
TAMPA, FL 33605

**Current Mailing Address:**

C/O DEBBIE CARTER  
P O BOX 5766  
TAMPA, FL 33675 US

**FEI Number:** 59-2908445

**Certificate of Status Desired:** No

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

CARTER, DEBBIE P  
2008 E. 8TH AVENUE  
TAMPA, FL 33605 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

**Officer/Director Detail :**

Title DP  
Name CARTER, DEBBIE  
Address 2008 E 8TH AVENUE  
City-State-Zip: TAMPA FL 33605

Title DVP  
Name FELCETTO, GERRY  
Address 2008 E. 8TH AVENUE  
City-State-Zip: TAMPA FL 33605

Title S  
Name NUNEZ, CRISTAL  
Address C/O DEBBIE CARTER  
2008 E 8TH AVENUE  
City-State-Zip: TAMPA FL 33605

Title TREASURER  
Name VICTOR, MIKE  
Address C/O DEBBIE CARTER  
2008 E 8TH AVENUE  
City-State-Zip: TAMPA FL 33605

*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:** MIKE VICTOR

**TREASURER**

**01/24/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date