

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 01, 2003 8:00 am
Secretary of State

05-01-2003 90783 013 ****61.25

0047032

DOCUMENT # 701539

1. Entity Name

THE CLEARWATER BAR ASSOCIATION, INC.



Principal Place of Business

**314 SOUTH MISSOURI AVENUE, SUITE 107
CLEARWATER FL 33756
US**

Mailing Address

**314 SOUTH MISSOURI AVENUE, SUITE 107
CLEARWATER FL 33756
US**

60026000



CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-1824423**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**FRANCE, KAREN E
314 SOUTH MISSOURI AVENUE, SUITE 107
CLEARWATER FL 33756**

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution.

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD JOHNSON, SHELLY M 2435 HWY 19 STE. 350 HOLIDAY FL 34691 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD FAEHNER, MICHAEL J 311 S. MISSOURI AVE. CLEARWATER FL 33756 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	1PPD SASSO, ANDREW B 2600 MCCORMICK DRIVE, SUITE 240 CLEARWATER FL 33759 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SCHILTZ, SCOTT E PO BOX 10655, 1968 BAYSHORE DUNEDIN FL 33757 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD DICKINSON, ROBERT C III 1230 S. MYRTLE AVE. STE. 101 CLEARWATER FL 33756 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition <i>see attached list</i>

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Michael J. Faehner*

4/29/03

727-461-1111

CR2E037 (10/02)

attachment

701539

**2003 — 2004
BOARD OF DIRECTORS
CLEARWATER BAR ASSOCIATION**

OFFICERS

President: Robert C. Dickinson, III, Thompson Executive Center, 1230 S. Myrtle Ave., Suite 101, Clearwater, FL 33756, phone 727-462-0123, fax 727-462-5260, dickinsonlaw@aol.com

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Treasurer: Peter A. Rivellini, Johnson, Blakely, Pope, et al, Post Office Box 1368, Clearwater, FL 33757, phone 727-461-1818, fax 727-441-8617, peter@jbpfirm.com

Immediate Past President: Michael J. Faehner, McFarland, Gould, Lyons, et al, 311 S. Missouri Ave., Clearwater, FL 33756, phone 727-461-1111, fax 727-461-6430, mfaehner@mgisplaw.com

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TERMS EXPIRE 2004

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