2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 17, 2001 8:00 am
Secretary of State
05-17-2001 90399 034 ****61.25

0061831

DOCUMENT # 737514

1. Entity Name

WINDLASSES OF THE WINDJAMMERS OF CLEARWATER, INC

Principal Place of Business	Mailing Address
5152 58 LANE N. KENNETH CITY FL 33709	5152 58 LANE N. KENNETH CITY FL 33709

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number NOT APPLICABLE ☐ Applied For ☐ Not Applicable

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
ALLEN, GAIL 5152 58 LANE N. KENNETH CITY FL 33709	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.

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 Department of State**

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD BELSON, MARILYN 1463 SUMMER ISLE CT. DUNEDIN FL 34698	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD Williams, Sharon 1891 Del 'Oro Ct. Dunedin, FL 34698	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD WIEHER, SANDY 2215 LAGOON DR. DUNEDIN FL 34698	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD Ayotte, Karen 210 Shore Drive Palm Harbor, FL 34683	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD BESCH, PATRICIA 2558 FOREST RUN CT. CLEARWATER FL 33761	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD Negley, Janice 138 Woodcreek Dr. E. Safety Harbor, FL 34695	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD MACK, KATHRYN 7 ELGIN PL., #507 DUNEDIN FL 34698	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD Dick, Betty 338 Pennsylvania Ave. Ozona, FL 34660	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (10/00)

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: Sharon Williams REQUIRED 4-30-01 727 733-5858