

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 02, 2008 8:00 am
Secretary of State

06-02-2008 90005 038 ****61.25

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| DOCUMENT # 758947 | |  | |
| 1. Entity Name SPARKLING CLEARWATER DEPRESSION GLASS CLUB, INC. | | | |
| Principal Place of Business 405 SEMINOLE ST CLEARWATER, FL 33755 | | Mailing Address 603 TURNER ST CLEARWATER, FL 33756 | |
| 2. Principal Place of Business - No P.O. Box # | | 3. Mailing Address 58 BAY WOODS DR | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | |
| City & State | | City & State SAFETY HARBOR FL | |
| Zip | Country | Zip 34695-5401 | Country USA |
| 6. Name and Address of Current Registered Agent | | 7. Name and Address of New Registered Agent | |
| WHITEHOUSE, ETHEL 603 TURNER ST. CLEARWATER, FL 33756 | | Name TOM CAMPBELL Street Address (P.O. Box Number is Not Acceptable) 58 BAY WOODS DR City SAFETY HARBOR FL Zip Code 34695 | |
| 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: TOM CAMPBELL <small>Signature, typed or printed name of registered agent and title if applicable.</small> | | Tom Campbell <small>(NOTE: Registered Agent signature required when reinstating)</small> | 5/30/2008 DATE |
| Filing Fee is \$61.25 Due by September 12, 2008 | | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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 | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | P POPLER, ALICE 2124 CATALINA DRIVE SOUTH CLEARWATER, FL 33764 <input 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 | T CAMPBELL, TOM 58 BAYWOOD DRIVE SAFETY HARBOR, FL 34695 <input 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 | S WYLCOFF, KATHRYN 851 ORANGVIEW DR LARGO, FL 33778 <input 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 | D THOMPSON, LEE 9985 56TH PLACE NORTH SAINT PETERSBURG, FL 33706 <input checked="" type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | VICE PRESIDENT BETSEY KROESEN 7974 SAILBOAT KEY BLVD S. #704 SOUTH PASADENA FL 33707 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PP WHITEHOUSE, ETHEL 603 TURNER STREET CLEARWATER, FL 33756 <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 | D STASY, AMY 10038 83 TERRACE NORTH BLDG. 7 SAINT PETERSBURG, FL 33708 <input checked="" type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: Tom Campbell Tom Campbell | | 5/30/2008 | 727-725-2069 |
| <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> | | <small>Date</small> | <small>Daytime Phone #</small> |



05312008 Chg-NP CR2E037 (12/06)

4. FEI Number 59-2437475 Applied For Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required