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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT 1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 766134 (1)
1. Corporation Name
THE CLEARWATER COIN CLUB, INC.

Principal Place of Business Mailing Address
34696 LAKE DR. PINELLAS PARK FL 34665-2646 US
34696 LAKE DR. PINELLAS PARK FL 34665-2646 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 12/14/1982
3a. Date of Last Report 05/01/1994
4. FEI Number 59-2248112
Applied For Not Applicable
5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status \$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 10636 Mill River Cr 27 P.O. Box 474
23 New Port Richey, FL 28 Dunedin, FL
24 34654-6029 25 Country 29 34697 30 Pinellas

9. Name and Address of Current Registered Agent
NEMETH, LANNY
34696 LAKE DR.
PINELLAS PARK FL 34665-2646

10. Name and Address of New Registered Agent
81 Name Theodore Pieniak
82 Street Address (P.O. Box Number is Not Acceptable) 10636 Mill River Cr.
83
84 City New Port Richey FL 85 Zip Code 34654-6029

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.
SIGNATURE Theodore A. Pieniak, Chairman T.A. Pieniak 4/26/95
Signature, typed or printed name of registered agent and fee if applicable (NOTE: Registered Agent signature required when transferring) DATE

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	BIRKHOLOZ, GIRDA
STREET ADDRESS	2004 7TH PLACE S.W.
CITY - ST - ZIP	LARGO FL 34840
TITLE	D
NAME	VONDERHARR, RICHARD
STREET ADDRESS	6809 122ND ST. N.
CITY - ST - ZIP	SEMINOLE FL 34842
TITLE	D
NAME	VOGELSANG, FLORENCE
STREET ADDRESS	11892 81ST AVE. N.
CITY - ST - ZIP	SEMINOLE FL 34842
TITLE	T
NAME	NEMETH, LANNY Y
STREET ADDRESS	34696 LAKE DR.
CITY - ST - ZIP	PINELLAS PARK FL 34665-2646
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Robert Pieniak	
1.3 STREET ADDRESS	2217 Richter DR	
1.4 CITY - ST - ZIP	Palm Harbor, FL 34693	
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY - ST - ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY - ST - ZIP		
4.1 TITLE	Treasurer	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	William P. Lynch	
4.3 STREET ADDRESS	1701 Hibiscus Circle N.	
4.4 CITY - ST - ZIP	Oldsmar, FL 34677	
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY - ST - ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(d), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Robert Pieniak, President Robert A. Pieniak (813) 794-9222
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #