

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000009712

FILED
Feb 18, 2009
Secretary of State

Entity Name: CLEARWATER COUNTRY CLUB ESTATES CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O WANEK PROPERTY MGMT
2155 N.E. COACHMAN RD
CLEARWATER, FL 33765

New Principal Place of Business:

Current Mailing Address:

C/O WANEK PROPERTY MGMT
2155 N.E. COACHMAN RD
CLEARWATER, FL 33765

New Mailing Address:

FEI Number: 75-3171813

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WANEK PROPERTY MANAGEMENT
2155 N.E. COACHMAN RD
CLEARWATER, FL 33765 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: TD () Delete
Name: DONAHUE, DONALD
Address: 312 LEBEAU ST
City-St-Zip: CLEARWATER, FL 33755

Title: PD () Delete
Name: BUTKI, GARY
Address: 712 NO HIGHLAND AVE
City-St-Zip: CLEARWATER, FL 33755

Title: SD () Delete
Name: GARCIA, MIRTA I
Address: 720 NO HIGHLAND AVE
City-St-Zip: CLEARWATER, FL 33755

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD (X) Change () Addition
Name: DONAHUE, KATHLEEN
Address: 312 LEBEAU ST
City-St-Zip: CLEARWATER, FL 33755

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SD (X) Change () Addition
Name: FOSTER, DAN
Address: 722 NO HIGHLAND AVE
City-St-Zip: CLEARWATER, FL 33755

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: CHRIS WANEK

RA

02/18/2009

Electronic Signature of Signing Officer or Director

Date