

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000004980

FILED
Jul 08, 2008
Secretary of State

Entity Name: CLEARWATER DOWNTOWN PARTNERSHIP, INC.

Current Principal Place of Business:

911 CHESTNUT STREET
CLEARWATER, FL 33756

New Principal Place of Business:

Current Mailing Address:

PO BOX 396
CLEARWATER, FL 33757

New Mailing Address:

FEI Number: 20-2834681 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

RIVELLINI, PETER A
911 CHESTNUT STREET
CLEARWATER, FL 33756 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: C () Delete
Name: MATHENY, DWIGHT R
Address: 229 FLORIDA AVE
City-St-Zip: DUNEDIN, FL 34678

Title: VC () Delete
Name: WARSHAUER, HOWARD
Address: 808 ALLEN DR
City-St-Zip: CLEARWATER, FL 33764

Title: T () Delete
Name: CLIFFORD, BOB
Address: 601 CLEVELAND ST #160
City-St-Zip: CLEARWATER, FL 33755

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: C (X) Change () Addition
Name: STURTEVANT, WILLIAM
Address: 6117 94TH AVE.
City-St-Zip: PINELLAS PARK, FL 33782

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

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

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: MATHENY, DWIGHT

Electronic Signature of Signing Officer or Director

C-F

07/08/2008

Date