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Feb 18 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N07369** (4)

1. Corporation Name

CLEARWATER DUPLICATE BRIDGE CLUB, INC.

Principal Place of Business

% **ELIHU H. BERMAN**
1525 S. BELCHER ROAD
CLEARWATER FL 34624

Mailing Address

% **ELIHU H. BERMAN**
1525 S. BELCHER ROAD
CLEARWATER FL 34624

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

3. Date Incorporated or Qualified

01/29/1985

4. FEI Number

NOT APPLICABLE

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. Is this nonprofit corporation a homeowners association?

☐ Yes

☒ No

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐ Yes

☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BERMAN, ELIHU H.
1525 S. BELCHER RD.
CLEARWATER FL 34624

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	☒ DELETE
NAME	JONES, JANET	
STREET ADDRESS	2170 AMERICUS BLVD., #53	
CITY-ST-ZIP	CLEARWATER FL	

TITLE	VD	☒ DELETE
NAME	GLASNAP, PATRICIA	
STREET ADDRESS	2519 MCMULLEN BOOTH RD., 510-303	
CITY-ST-ZIP	CLEARWATER FL	

TITLE	TD	☐ DELETE
NAME	SWAN, JR. D	
STREET ADDRESS	300 S DUNCAN AVE., 238	
CITY-ST-ZIP	CLEARWATER FL	

TITLE	SD	☒ DELETE
NAME	GARWOOD, RUTH	
STREET ADDRESS	1719 CYPRESS AVE	
CITY-ST-ZIP	BELLEAIR FL	

TITLE	D	☒ DELETE
NAME	RICKETT, DOYLE	
STREET ADDRESS	1556 FARRIER TRAIL	
CITY-ST-ZIP	CLEARWATER FL	

TITLE	D	☐ DELETE
NAME	DUGEN, LAVERNE	
STREET ADDRESS	2722D SHERBROOKE LN	
CITY-ST-ZIP	PALM HARBOR FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	P/D	☐ Change ☒ Addition
1.2 NAME	Robert Owens	
1.3 STREET ADDRESS	862 Centerwood Dr.	
1.4 CITY-ST-ZIP	Tarpon Springs, FL 34689	

2.1 TITLE	V/D	☐ Change ☒ Addition
2.2 NAME	Jack Longman	
2.3 STREET ADDRESS	2786 Camden Rd.	
2.4 CITY-ST-ZIP	Clearwater, FL 33759	

3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		

4.1 TITLE	S/D	☐ Change ☒ Addition
4.2 NAME	Frances Nelson	
4.3 STREET ADDRESS	903 Whippoorwill Dr.	
4.4 CITY-ST-ZIP	Palm Harbor, FL 34695	

5.1 TITLE	D	☐ Change ☒ Addition
5.2 NAME	Bob Deutsch	
5.3 STREET ADDRESS	515 Tabor Ct.	
5.4 CITY-ST-ZIP	Safety Harbor, FL 34695	

6.1 TITLE	D	☐ Change ☒ Addition
6.2 NAME	Lorraine Humphrey	
6.3 STREET ADDRESS	3555 Sylvan Edge Dr.	
6.4 CITY-ST-ZIP	Palm Harbor, FL 34685	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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 in an attachment with an address.

SIGNATURE: *Robert D. Owens*

2/10/98 ✓ <813> ✓ 938-1387

CR2E037 (1097)