

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N34522

FILED  
Apr 09, 2006  
Secretary of State

Entity Name: SOUTH CLEARWATER CITIZENS FOR PROGRESSIVE ACTIONASSOCIATION, INC.

**Current Principal Place of Business:**

1426 SOUTH GREENWOOD  
CLEARWATER, FL 33756 US

**New Principal Place of Business:**

1426 SO. MARTIN LUTHER KING JR..AVE.  
CLEARWATER, FL 33756 US

**Current Mailing Address:**

1120 KINGSLEY  
CLEARWATER, FL 33756 US

**New Mailing Address:**

FEI Number: 59-2994917      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

TIEMAN, L D  
1120 KINGLEY ST  
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: PD ( ) Delete  
Name: TIEMAN, L.,  
Address: 1120 KINGSLEY ST  
City-St-Zip: CLEARWATER, FL 33756

Title: VP ( ) Delete  
Name: ANDERSON, KENNETH  
Address: 1325 WASHINGTON AVE SO  
City-St-Zip: CLEARWATER, FL 33756

Title: ST ( ) Delete  
Name: TIEMAN, GENI  
Address: 1120 KINGSLEY ST  
City-St-Zip: CLEARWATER, FL 33756

Title: D ( ) Delete  
Name: DUDLEY, LUCILLE  
Address: 1584 TILLEY AVENUE  
City-St-Zip: CLEARWATER, FL 33756

Title: D (X) Delete  
Name: CARPENTER EMMET W.,  
Address: 1565 SCRANTON AVENUE  
City-St-Zip: CLEARWATER, FL 33756

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: TIEMAN, L. DUKE  
Address: 1120 KINGSLEY ST  
City-St-Zip: CLEARWATER, FL 33756

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

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

Title: D (X) Change ( ) Addition  
Name: GOLDEN, NATHANIEL  
Address: 1127 HARVEY LN.  
City-St-Zip: CLEARWATER, FL 33756

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

I hereby certify that the information supplied with this filing does not qualify for the 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: L. DUKE TIEMAN

PRES

04/09/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date