

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 22, 2001 8:00 am
Secretary of State

05-22-2001 90013 007 ***150.00

DOCUMENT # N92000000454

1. Entity Name

CLEARWATER AQUATIC TEAM BOOSTER CLUB, INC.

Principal Place of Business

1501 N. BELCHER ROAD
 CLEARWATER FL 33765
 US

Mailing Address

1501 N. BELCHER ROAD
 CLEARWATER FL 33765
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3164776

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

YEARWOOD, MICHAEL
1501 N. BELCHER ROAD
CLEARWATER FL 33765

Name

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

City

FL

Zip Code

8. 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

Michael L. Yearwood

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

(NOTE: Registered Agent signature required when reinstating)

3-26-01

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution.

\$5.00 May Be
 Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT SGRIGNOLI, DIANNE 2260 WARWICK DR. OLDSMAR FL 34677	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV CARPENTER, JAY 612 HARBOR ISLAND CLEARWATER FL 33767	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP BULLOCK, RICHARD 2823 RESNIK CIR WEST PALM HARBOR FL 34683	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED



DO NOT WRITE IN THIS SPACE

CR2E037 (10/00)

DOCUMENT
N 920000000 454 / 845494

**APPELTNALL
& ROEDER**
CERTIFIED PUBLIC ACCOUNTANTS

FILING INSTRUCTIONS

UNIFORM BUSINESS REPORT

TAXPAYER Clearwater Aquatic Team Booster Club, Inc.

YEAR 2001

You are required to file a Uniform Business Report Annually in order to keep your corporation active in the State of Florida. Please review the data in boxes 1, 6, and 11. If any changes are necessary, indicate such changes in the related change boxes. Note that if you change the registered agent, the new registered agent must sign and complete the line in box 8.

An Officer / Director must sign the return in Box 13, and print name, title and date. Mail the return to the address indicated below in time to be postmarked on or before
May 1, 2001.

There is a filing fee of \$150.00 due with this return. Send your check for this amount payable to the "DEPARTMENT OF STATE" with the return.

**MAIL TO: DIVISION OF CORPORATIONS
UNIFORM BUSINESS REPORT FILINGS
P. O. BOX 1500
TALLAHASSEE, FL 32302-1500**

IMPORTANT

If filed after May 1, filing fee is \$550.00.

Retain the copy for your files after indicating thereon the date signed; by whom signed, dated mailed and check number.