

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N92000000454

FILED
May 22, 2006
Secretary of State

Entity Name: CLEARWATER AQUATIC TEAM BOOSTER CLUB, INC.

Current Principal Place of Business:

1501 N. BELCHER ROAD
SUITE 229
CLEARWATER, FL 33765 US

New Principal Place of Business:

Current Mailing Address:

1501 N. BELCHER ROAD
SUITE 229
CLEARWATER, FL 33765 US

New Mailing Address:

FEI Number: 59-3164776 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:

YEARWOOD, MICHAEL
1501 N. BELCHER ROAD
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: PRES () Delete
Name: WARNER, JANINE
Address: 3279 MASTERS DR.
City-St-Zip: CLEARWATER, FL 33761

Title: TREA () Delete
Name: GUYLER, MICHAEL
Address: 3547 FAIRWAY FOREST DR.
City-St-Zip: PALM HARBOR, FL 34685

Title: DIR () Delete
Name: YEARWOOD, MICHAEL
Address: 3221 BROOKSIDE CT.
City-St-Zip: TARPON SPRINGS, FL 34688

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: ROPER, VONNA
Address: 529 SKYVIEW AVE
City-St-Zip: CLEARWATER, FL 33756

Title: TREA (X) Change () Addition
Name: BUCKLEY, JIM
Address: 1561 WHARFSIDE DR
City-St-Zip: TARPON SPRINGS, FL 34689

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: CHRISTINE GINO

_____ Electronic Signature of Signing Officer or Director

BKPR

05/22/2006

_____ Date