

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000004690

FILED  
Jul 11, 2006  
Secretary of State

Entity Name: HIGH POINT COMMUNITY PRIDE, INC.

**Current Principal Place of Business:**

6399 142ND AVE N  
STE 116  
CLEARWATER, FL 33760

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 17296  
CLEARWATER, FL 33762

**New Mailing Address:**

FEI Number: 59-3529732      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
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:**

SPAIN, GEORGE  
2111 62ND STREET NORTH, APT 904  
CLEARWATER, FL 33760      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: CD      ( ) Delete  
Name: SPAIN, GEORGE  
Address: 2111 62ND STREET NORTH, APT 904  
City-St-Zip: CLEARWATER, FL 33760

Title: TD      ( ) Delete  
Name: DE GARMO, JOANNE  
Address: 1160 81ST STREET SOUTH  
City-St-Zip: ST. PETERSBURG, FL 33707

Title: SD      ( ) Delete  
Name: LEVER, FRAN  
Address: 3726 RAINTREE COURT  
City-St-Zip: PALM HARBOR, FL 34865

Title: VC      ( ) Delete  
Name: ANDERSON, JIM  
Address: 14733 SUNSET STREET, APT A  
City-St-Zip: CLEARWATER, FL 33760

Title: DIR.      ( ) Delete  
Name: ADAMS, MARGARET  
Address: 2133 13TH AVE SW  
City-St-Zip: LARGO, FL 33770

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

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

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

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

Title: VC      (X) Change ( ) Addition  
Name: CHERKAS, BRUCE  
Address: 4355 84TH AVE N  
City-St-Zip: PINELLAS PARK, FL 33781

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: MARGO ADAMS

Electronic Signature of Signing Officer or Director

DIR.

07/11/2006

Date