

03-27-2003 90074 015 ****61.25

**2003 NOT-FOR-PROFIT CORPORATION
 UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # N98000004690

1. Entity Name
HIGH POINT COMMUNITY PRIDE, INC.



Principal Place of Business
 5812 150TH AVE NORTH
 CLEARWATER, FL 33760

Mailing Address
 PO BOX 17296
 CLEARWATER, FL 33762

55049815

2. Principal Place of Business
 6399 142nd Ave N
 Suite, Apt. #, etc.
 Suite 116
 City & State
 Clearwater FL
 Zip
 33760
 County
 Pinellas

3. Mailing Address
 Suite, Apt. #, etc.
 City & State
 Zip
 Country



CHECK HERE IF MAKING CHANGES

4. FEI Number
59-3529732

Applied For
 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
BRIGHT, LENDEL
 5861 COFFEE BEAN DR
 CLEARWATER, FL 33760

7. Name and Address of New Registered Agent
 Name **Rita George**
 Street Address (P.O. Box Number is Not Acceptable)
14698 63rd Way N.
 City **Clearwater** FL Zip Code **33760**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *[Signature]* DATE **6/3/03**

(NOTE: Registered Agent signature required when resigning)

FILE NOW: FEE \$5.00

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE C	<input checked="" type="checkbox"/> Delete BRIGHT, LENDEL 5861 COFFEE BEAN DR CLEARWATER, FL 33760	TITLE Chairman	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Rita George 14698 63rd Way N. Clearwater, FL 33760
TITLE TD	<input checked="" type="checkbox"/> Delete BROWN, DENETRIAS 14936 66TH WAY N. CLEARWATER, FL 33760	TITLE Treasurer	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Elizabeth Dryden 14820 63rd Way N apt. A Clearwater, FL 33760
TITLE D	<input checked="" type="checkbox"/> Delete KIRKLAND, AMY 6239 149TH AVE NORTH CLEARWATER, FL 33760	TITLE Secretary	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Michele Kessler 15401 George Blvd Clearwater, FL 33760
TITLE DS	<input checked="" type="checkbox"/> Delete EVANS, VIVIAN 6200 149TH AVE. NORTH CLEARWATER, FL 33760	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> Delete	TITLE	<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]* DATE: **6/3/03** 533-8930

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CRPER037 (10/02)