

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2006 8:00 am
Secretary of State

04-28-2006 90178 006 ****61.25

DOCUMENT # N99000001258

1. Entity Name
CLEARWATER LADY BOMBERS, INC.



Principal Place of Business
**% BOLLENBACK & FORRET, P.A.
1000 PINELLAS ST
CLEARWATER, FL 33756**

Mailing Address
**% BOLLENBACK & FORRET, P.A.
1000 PINELLAS ST
CLEARWATER, FL 33756**

400000000



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04252006

Chg-NP

CR2E037 (11/05)

4. FEI Number
59-3061592

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**BOLLENBACK, MICHAEL
% BOLLENBACK & FORRET, P.A.
1000 PINELLAS ST
CLEARWATER, FL 33756**

7. Name and Address of New Registered Agent

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

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2006**

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DP
BRANDON, DAVID
233 SHORE DR. P.O. BOX 603
OZONA, FL 34660** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DT
ESTES, LYNDA
4345 RIDGEMOOR DR. N.
PALM HARBOR, FL 34685** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DS
HOFER, DIANA
3325 ENTERPRISE ROAD E
SAFETY HARBOR, FL 34695** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DV
ADAMS, SUSAN
2089 CASTILLE DR
DUNEDIN, FL 34698** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DP
Rick Palumbo
2980 Kensington Trace
Tarpon Springs, FL 34688** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DS
Michelle Zalewski
10423 Kumquat Lane
Seminole, FL 33772** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

Lynda Estes / *Lynda Estes* 4/26/06 813-366-4189

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #