2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 13, 2002 8:00 am
Secretary of State
05-13-2002 90036 026 ****61.25

DOCUMENT # N99000007132

1. Entity Name

CLEARWATER ARTS! FOUNDATION, INC.

Principal Place of Business	Mailing Address
1130 CLEVELAND STREET CLEARWATER FL 33757	POST OFFICE BOX 2457 CLEARWATER FL 33757

R00097075

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
100 S. MYRTLE AVE Suite, Apt. #, etc.	POST OFFICE BOX 955 Suite, Apt. #, etc.
City & State: CLEARWATER FL	City & State: CLEARWATER, FL
Zip: 33756 Country: USA	Zip: 33757-0955 Country: USA

4. FEI Number 59-3629009 ☐ 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
FORTINO, GERRI 1130 CLEVELAND STREET CLEARWATER FL 33755	Name: WALBOLT MARGO Street Address (P.O. Box Number is Not Acceptable): 100 S. MYRTLE AVE City: CLEARWATER FL Zip Code: 33756

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: Margo Walbolt — Margo Walbolt — 4-24-02
Signature, type or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 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	T HARDMAN, DAVID 450-11 LAKEVIEW DR PALM HARBOR FL 34683	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MILLER LOIS POST OFFICE BOX 5165 CLEARWATER, FL 33758-5165	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S RAYMOND, GERRI 249 WINDWARD PASSAGE CLEARWATER FL 33767	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P COLE, SHEILA POST OFFICE BOX 3573 CLEARWATER FL 33767	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP MEIDEL, MICHAEL 1130 CLEVELAND STREET CLEARWATER FL 33757	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VICE PRES SMITH, DIANE 575 INDIAN ROCKS RD N BELLEAIR BLUFFS, FL 33770	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CARLISLE, STEVE 34 N. FORT HARRISON AVE CLEARWATER FL 33755	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D FREEDMAN, ROBERT A 1111 MCMULLEN BOOTH ROAD CLEARWATER FL 33759	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (9/01)

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 DAVID HARDMAN VP — 4-24-02 — 727-784-8633
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #