

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000007132

FILED
Mar 25, 2004
Secretary of State

Entity Name: CLEARWATER ARTS! FOUNDATION, INC.

Current Principal Place of Business:

100 S MYRTLE AVE
CLEARWATER, FL 33756

New Principal Place of Business:

Current Mailing Address:

PO BOX 955
CLEARWATER, FL 337570955

New Mailing Address:

FEI Number: 59-3629009

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WALBOLT, MARGO
100 S MYRTLE AVE
CLEARWATER, FL 33756

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: T () Delete
Name: HARDMAN, DAVID
Address: 450-11 LAKEVIEW DR
City-St-Zip: PALM HARBOR, FL 34683

Title: P () Delete
Name: RAYMOND, GERRI
Address: 249 WINDWARD PASSAGE
City-St-Zip: CLEARWATER, FL 33767

Title: D () Delete
Name: COLE, SHEILA
Address: POST OFFICE BOX 3573
City-St-Zip: CLEARWATER, FL 33767

Title: D () Delete
Name: MILLER, LOIS
Address: PO BOX 5165
City-St-Zip: CLEARWATER, FL 337585165

Title: D () Delete
Name: CARLISLE, STEVE
Address: 34 N. FORT HARRISON AVE
City-St-Zip: CLEARWATER, FL 33755

Title: D () Delete
Name: FREEDMAN, ROBERT A
Address: 1111 MCMULLEN BOOTH ROAD
City-St-Zip: CLEARWATER, FL 33759

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: P (X) Change () Addition
Name: LOEHR, NANCY
Address: 17757 US HWY 19 N S-560
City-St-Zip: CLEARWATER, FL 33764

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: () 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 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 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: DAVE HARDMAN

TRES

03/25/2004

Electronic Signature of Signing Officer or Director

Date