

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000007132

FILED
Apr 14, 2009
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 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: S () Delete
Name: GRAY, GARY
Address: 1617 GULF TO BAY
City-St-Zip: CLEARWATER, FL 33755

Title: P () Delete
Name: DANIELS, BETH
Address: 911 CHESNUT
City-St-Zip: CLEARWATER, FL 33756

Title: D () Delete
Name: SALLIE, PARKS
Address: 1334 MICHIGAN AVE
City-St-Zip: CLEARWATER, FL 34683

Title: D () Delete
Name: POPP, ROBIN
Address: 310 PATRICIA AVE
City-St-Zip: CLEARWATER, FL 33765

Title: D () Delete
Name: CANTONIS, MARIA
Address: 205 BAYVIEW DRIVE
City-St-Zip: CLEARWATER, FL 33756

Title: DT () Delete
Name: MCMILLAN, MARLY
Address: 851 MANDALAY AVE
City-St-Zip: CLEARWATER, FL 33767

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S (X) Change () Addition
Name: RAYMOND, GERRI
Address: 1130 CLEVELAND ST
City-St-Zip: CLEARWATER, FL 33755

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

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

Title: D (X) Change () Addition
Name: RULEY, SUZANNE
Address: 2955 LANDMARK WAY
City-St-Zip: PALM HARBOR, FL 34683

Title: D (X) Change () Addition
Name: HINSON, JAI
Address: 1606 N. HIGHLAND AVE
City-St-Zip: CLEARWATER, FL 33755

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

I hereby certify that the information supplied with this filing does not qualify 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: MARLY MCMILLAN

DT

04/14/2009

Electronic Signature of Signing Officer or Director

Date