

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 550262

FILED
Apr 14, 2005
Secretary of State

Entity Name: EXECUTIVE CORPORATION OF CLEARWATER, INC.

Current Principal Place of Business:

2506 COUNTRYSIDE BLVD.
CLEARWATER, FL 346231601

New Principal Place of Business:

Current Mailing Address:

11691 GATEWAY BLVD
203
FT MYERS, FL 33913 US

New Mailing Address:

FEI Number: 59-1828327 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

SARVER, HELEN I.
11691 GATEWAY BLVD
203
FT MYERS, FL 33413 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CROUCH, S. LEE,
Address: 5260 S. LANDINGS DR #704
City-St-Zip: FT. MYERS, FL

Title: VP () Delete
Name: CREEL, C.E.,
Address: 560 PALMETTO
City-St-Zip: BELLEAIR, FL

Title: ST () Delete
Name: SARVER, HELEN I.,
Address: 9232 PINEAPPLE ROAD
City-St-Zip: FORT MYERS, FL 33912

Title: VP () Delete
Name: SMITH, DAVID C.,
Address: 18225 RICCARDO ROAD
City-St-Zip: FT MYERS, FL 33912

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: HELEN I. SARVER

STD

04/14/2005

Electronic Signature of Signing Officer or Director

Date