

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**

**Apr 24, 2013**

**Secretary of State**

**CC1283140770**

DOCUMENT# 701539

**Entity Name:** THE CLEARWATER BAR ASSOCIATION, INC.

**Current Principal Place of Business:**

314 SOUTH MISSOURI AVENUE, SUITE 107  
CLEARWATER, FL 33756

**Current Mailing Address:**

314 SOUTH MISSOURI AVENUE, SUITE 107  
CLEARWATER, FL 33756 US

**FEI Number:** 59-1824423

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

FRANCE, KAREN E  
314 SOUTH MISSOURI AVENUE, SUITE 107  
CLEARWATER, FL 33756 US

*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

**Officer/Director Detail :**

Title            PRESIDENT  
Name            HEPTNER, BRIDGET A  
Address        2560 GULF TO BAY BLVD., #250  
City-State-Zip: CLEARWATER FL 33765

Title            DIRECTOR  
Name            CROWELL, DONALD S  
Address        315 COURT STREET  
City-State-Zip: CLEARWATER FL 33756

Title            TREASURER  
Name            FAEHNER, MICHAEL J  
Address        600 BYPASS DRIVE  
                 SUITE 208  
City-State-Zip: CLEARWATER FL 33764

Title            DIRECTOR  
Name            COLEMAN, SHERWOOD S  
Address        10750 ULMERTON ROAD  
City-State-Zip: LARGO FL 33778

Title            PRESIDENT ELECT  
Name            IRIZARRY, MYRIAM  
Address        315 COURT STREET  
                 4TH FLOOR  
City-State-Zip: CLEARWATER FL 33756

Title            DIRECTOR  
Name            CHILSON, JOSHUA T  
Address        133 N FT HARRISON  
City-State-Zip: CLEARWATER FL 33755

Title            DIRECTOR  
Name            PARRI, DANIEL C.  
Address        1217 PONCE DE LEON BOULEVARD  
City-State-Zip: CLEARWATER FL 33756

Title            DIRECTOR  
Name            STINSON, SHERRI M.  
Address        1239 S MYRTLE AVE  
City-State-Zip: CLEARWATER FL 33756

**Continues on page 2**

*I hereby 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 all other like empowered.*

**SIGNATURE:** BRIDGET A. HEPTNER

**PRESIDENT**

**04/24/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name KASZUBA, KIM L  
Address 200 N GARDEN AVE  
SUITE A  
City-State-Zip: CLEARWATER FL 33755

Title DIRECTOR  
Name BELLEW, BRANDON D  
Address 911 CHESTNUT ST  
City-State-Zip: CLEARWATER FL 33756

Title DIRECTOR  
Name NADEAU, MICHELLE E  
Address 133 N FT HARRISON  
City-State-Zip: CLEARWATER FL 33755

Title DIRECTOR  
Name ELLIS, DAVID ROBERT  
Address 275 N CLEARWATER/LARGO RD  
City-State-Zip: LARGO FL 33770

Title DIRECTOR  
Name LIBBEY, STEPHANIE  
Address 3531 PALM HARBOR BLVD  
City-State-Zip: PALM HARBOR FL 34683

Title DIRECTOR  
Name WOOD, RACHAEL L  
Address 777 ALDERMAN ROAD  
City-State-Zip: PALM HARBOR FL 34683