

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 703601

**Entity Name:** ROTARY CLUB OF CLEARWATER BEACH, INC.**Current Principal Place of Business:**1265 S. MYRTLE AVENUE  
CLEARWATER, FL 33756**Current Mailing Address:**POST OFFICE BOX 3866  
CLEARWATER, FL 33761**FEI Number:** 59-6152310**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**RIVES, HOWARD P  
1265 S. MYRTLE AVENUE  
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	DIRECTOR
Name	BECKERS, HILMER
Address	11 BAYMONT ST
City-State-Zip:	CLEARWATER FL 33767

Title	SECRETARY
Name	EVEREST, ALEXANDRA
Address	440 GULFVIEW
City-State-Zip:	CLEARWATER FL 33767

Title	DIRECTOR
Name	FUNK, JOHN
Address	521 MANDALAY AVE
City-State-Zip:	CLEARWATER FL 33767

Title	TREASURER
Name	NGUYEN, VI
Address	1153 MAIN ST SUITE 105
City-State-Zip:	DUNEDIN FL 34698

Title	VP
Name	BOTTIE, ADAM
Address	3510 MAGNOLIA RIDGE CIR #503
City-State-Zip:	PALM HARBOR FL 34684

Title	PRESIDENT
Name	EKONOMIDES, NICK
Address	201 DRIFTWOOD LANE
City-State-Zip:	LARGO FL 33770

Title	DIRECTOR
Name	KATZ, NATHAN G
Address	1700 PEACEFUL AVENUE
City-State-Zip:	BELLEAIR FL 33756

*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:** NICKOLAS EKONOMIDES**PRESIDENT****04/23/2014**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date