above, or on an attachment with all other like empowered.

SIGNATURE: CRAIG GILMAN

Electronic Signature of Signing Officer/Director Detail

### **Current Principal Place of Business:** 1501 N. BELCHER RD. SUITE 236

Entity Name: CLEARWATER FOR YOUTH, INC.

CLEARWATER. FL 33765

**DOCUMENT# 722579** 

# **Current Mailing Address:**

1501 N. BELCHER RD. SUITE 236 CLEARWATER, FL 33765 US

# FEI Number: 59-1408073

## Name and Address of Current Registered Agent:

WATTS, STEPHEN G. ESQ. 1446 COURT STREET CLEARWATER, FL 33756 US Certificate of Status Desired: No

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

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

# **Officer/Director Detail :**

Title	D	Title	D
Name	FISHER, WILLIAM	Name	MILLER, RON
Address	2075 ENVOY COURT, NORTH	Address	1100 BROOKSIDE DRIVE
City-State-Zip:	CLEARWATER FL 33764	City-State-Zip:	CLEARWATER FL 33764
Title	С	Title	D
Name	AUNGST, BRIAN	Name	TIMBERLAKE, JOHN
Address	2633 BRATTLE LANE	Address	601 OLD COACHMAN ROAD
City-State-Zip:	CLEARWATER FL 33761	City-State-Zip:	CLEARWATER FL 33764
Title	TS	Title	D
Name	GILMAN, CRAIG	Name	WEAVER, CHARLES
Address	33 GARDEN AVE N	Address	12507 BRONCO DRIVE
City-State-Zip:	CLEARWATER FL 33756	City-State-Zip:	TAMPA FL 33625

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

TREASURER

04/09/2015

Date

Date