

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 722579

Entity Name: CLEARWATER FOR YOUTH, INC.**Current Principal Place of Business:**1501 N. BELCHER RD. SUITE 236
CLEARWATER, FL 33765**Current Mailing Address:**1501 N. BELCHER RD. SUITE 236
CLEARWATER, FL 33765 US**FEI Number: 59-1408073****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**WATTS, STEPHEN G. ESQ.
1446 COURT STREET
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	D
Name	FISHER, WILLIAM
Address	2075 ENVOY COURT, NORTH
City-State-Zip:	CLEARWATER FL 33764

Title	D
Name	MILLER, RON
Address	1100 BROOKSIDE DRIVE
City-State-Zip:	CLEARWATER FL 33764

Title	C
Name	AUNGST, BRIAN
Address	2633 BRATTLE LANE
City-State-Zip:	CLEARWATER FL 33761

Title	D
Name	TIMBERLAKE, JOHN
Address	601 OLD COACHMAN ROAD
City-State-Zip:	CLEARWATER FL 33764

Title	TS
Name	GILMAN, CRAIG
Address	33 GARDEN AVE N
City-State-Zip:	CLEARWATER FL 33756

Title	D
Name	WEAVER, CHARLES
Address	12507 BRONCO DRIVE
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 above, or on an attachment with all other like empowered.

SIGNATURE: CRAIG GILMAN**TREASURER****04/13/2017**_____
Electronic Signature of Signing Officer/Director Detail_____
Date