2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 737483

Entity Name: CLEARWATER POINT SWIM CLUB, INC.

Current Principal Place of Business:

7300 PARK ST

SEMINOLE, FL 33777

Current Mailing Address:

7300 PARK STREET

SEMINOLE, FL 33777 US

FEI Number: 59-1785075 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RABIN, PARKER 28163 US HWY 19 N CLEARWATER, FL 33761 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

FILED May 14, 2020

Secretary of State

7668894755CC

Officer/Director Detail :

Title **PRESIDENT** Title VΡ

WECHSLER, ILANA STEIN, FRANCES Name Name 7300 PARK STREET 7300 PARK STREET Address Address City-State-Zip: SEMINOLE FL 33777 SEMINOLE FL 33777 City-State-Zip:

Title **TREASURER** Title **SECRETARY** Name STEIN, FRANCES **SECRETARY** Name Address 7300 PARK STREET Address 7300 PARK STREET City-State-Zip: SEMINOLE FL 33777 City-State-Zip: SEMINOLE FL 33777

Title DIRECTOR Title **DIRECTOR**

Name PARTSINEVELOS, GEORGE MEO. SAM Name

Address 7300 PARK ST Address 7300 PARK STREET

City-State-Zip: SEMINOLE FL 33777 SEMINOLE FL 33777 City-State-Zip:

Title DIRECTOR Title DIRECTOR WORRELL, MIKE Name MOORE, LEON Name 7300 PARK ST Address Address 7300 PARK ST

City-State-Zip: SEMINOLE FL 33777 SEMINOLE FL 33777 City-State-Zip:

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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.

05/14/2020 SIGNATURE: ILANA WCHSLER **PRESIDENT**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR Title DIRECTOR

NameBYRNES, KEVINNameHERMAN, BRUCEAddress7300 PARK STAddress7300 PARK STREET

City-State-Zip: SEMINOLE FL 33777 City-State-Zip: SEMINOLE FL 33777

Title DIRECTOR Title DIRECTOR

NameMICHALEK, CHRISTINENameGIERLASZYNSKI, PAMELAAddress7300 PARK STREETAddress7300 PARK STREET

City-State-Zip: SEMINOLE FL 33777 City-State-Zip: SEMINOLE FL 33777

TitleDIRECTORTitleDIRECTORNameIRVINE, JERRYNameJANSEN, GREGAddress7300 PARK STREETAddress7300 PARK STREET

City-State-Zip: SEMINOLE FL 33777 City-State-Zip: SEMINOLE FL 33777

TitleDIRECTORTitleDIRECTORNameMUELLER, CHUCKNameVOSNOS, TIM

Address 7300 PARK STREET Address 7300 PARK STREET

City-State-Zip: SEMINOLE FL 33777 City-State-Zip: CLEARWATER FL 33777