

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 737483

FILED
Apr 20, 2016
Secretary of State
CC7645101289

Entity Name: CLEARWATER POINT SWIM CLUB, INC.

Current Principal Place of Business:

845 S GULFVIEW DR
CLEARWATER, FL 33767

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

Officer/Director Detail :

Title PRESIDENT
Name SPANDE, GERRY
Address 7300 PARK STREET
City-State-Zip: SEMINOLE FL 33777

Title VP
Name SULLIVAN, JOE
Address 7300 PARK STREET
City-State-Zip: SEMINOLE FL 33777

Title SECRETARY
Name GIVENS, CHARLENE
Address 7300 PARK STREET
City-State-Zip: SEMINOLE FL 33777

Title TREASURER
Name MICHALEK, RUDY
Address 7300 PARK STREET
City-State-Zip: SEMINOLE FL 33777

Title DIRECTOR
Name RUZZO, PAT
Address 7300 PARK STREET
City-State-Zip: SEMINOLE FL 33777

Title DIRECTOR
Name ALBRECHT, CLIFF
Address 7300 PARK STREET
City-State-Zip: SEMINOLE FL 33777

Title DIRECTOR
Name MOORE, LEON
Address 7300 PARK STREET
City-State-Zip: SEMINOLE FL 33777

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

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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.

SIGNATURE: GERRY SPANDE

PRESIDENT

04/20/2016

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name SUTKOWI, RON
Address 7300 PARK STREET
City-State-Zip: SEMINOLE FL 33777

Title DIRECTOR
Name STEVENSON, RON
Address 7300 PARK STREET
City-State-Zip: SEMINOLE FL 33777

Title VP
Name GILLEN, FRANCIS
Address 7300 PARK STREET
City-State-Zip: SEMINOLE FL 33777

Title DIRECTOR
Name CARLEY, GERRY
Address 7300 PARK STREET
City-State-Zip: SEMINOLE FL 33777

Title DIRECTOR
Name PAZAN, PAUL
Address 7300 PARK STREET
City-State-Zip: SEMINOLE FL 33777

Title DIRECTOR
Name ALSTON, STEVE
Address 7300 PARK STREET
City-State-Zip: SEMINOLE FL 33777