## 2021 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** Apr 16, 2021

**Secretary of State** 

7463681831CC

Officer/Director Detail :

Title **PRESIDENT** Title VΡ

WECHSLER, ILANA JENSEN, GREG 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 MUELLER, CHUCK Name TARLETON, SHIRLEY Address 7300 PARK STREET Address 7300 PARK STREET SEMINOLE FL 33777 City-State-Zip: City-State-Zip: SEMINOLE FL 33777

Title DIRECTOR Title **DIRECTOR** Name BYRNES, KEVIN 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

Name CRAVENS, MARY ELLEN SALIEMO, TONY Name 7300 PARK STREET Address Address 7300 PARK STREET

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.

04/16/2021 SIGNATURE: ILANA WECHSLER **PRESIDENT** 

Electronic Signature of Signing Officer/Director Detail

Date

## Officer/Director Detail Continued:

Title DIRECTOR

Name DIAZ, CARLOS

Address 7300 PARK STREET

City-State-Zip: SEMINOLE FL 33777

Title DIRECTOR
Name VOSNOS, TIM

Address 7300 PARK STREET

City-State-Zip: CLEARWATER FL 33777

Title DIRECTOR

Name LAGATTUTA, JIM

Address 7300 PARK STREET

City-State-Zip: SEMINOLE FL 33777