

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 762444

Entity Name: CLEARWATER HOUSING DEVELOPMENT CORPORATION, INC.**Current Principal Place of Business:**28050 U.S. HWY 19 N SUITE 103
CLEARWATER, FL 33761**Current Mailing Address:**28050 U.S. HWY 19 N SUITE 103
CLEARWATER, FL 33761 US**FEI Number: 13-4276896****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**CORPDIRECT AGENTS, INC
1200 SOUTH PINE ISLAND ROAD
MIAMI, FL 33324 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	SECRETARY
Name	RIVERA, JACQUELINE
Address	28050 U.S. HWY 19 N SUITE 103
City-State-Zip:	CLEARWATER FL 33761

Title	VP
Name	DORAN, JOHN
Address	28050 U.S. HWY 19 N SUITE 103
City-State-Zip:	CLEARWATER FL 33761

Title	PRESIDENT
Name	SMITH, JEFFERY
Address	28050 U.S. HWY 19 N SUITE 103
City-State-Zip:	CLEARWATER FL 33761

Title	DIRECTOR
Name	JAMMO, CAITLEIN
Address	28050 U.S. HWY 19 N SUITE 103
City-State-Zip:	CLEARWATER FL 33761

Title	DIRECTOR
Name	AGNEW, KATHLEEN
Address	28050 U.S. HWY 19 N SUITE 103
City-State-Zip:	CLEARWATER FL 33761

Title	DIRECTOR
Name	DAHER, SAHAR
Address	28050 U.S. 19 N SUITE 103
City-State-Zip:	CLEARWATER FL 33761

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: JACQUELINE RIVERA**SECRETARY****01/17/2018**_____
Electronic Signature of Signing Officer/Director Detail_____
Date