

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N11000007366

**Entity Name:** FOE LADIES AUXILIARY CLEARWATER 3452, INC.

**Current Principal Place of Business:**

1485 GULF TO BAY BLVD.  
CLEARWATER, FL 33755

**Current Mailing Address:**

2580 NURSERY ROAD  
224  
CLEARWATER, FL 33764 US

**FEI Number:** 23-7592659

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

BARBER, BARBARA  
2580 NURSERY ROAD  
224  
CLEARWATER, FL 33764 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            DIRECTOR  
Name            BARBER, BARBARA  
Address        2580 NURSERY RD, #224  
City-State-Zip: CLEARWATER FL 33764

Title            DIRECTOR  
Name            LAMOREAUX, JEAN  
Address        1400 LOTUS PATH  
City-State-Zip: CLEARWATER FL 33756

Title            DIRECTOR  
Name            SPAULDING, ELIZABETH  
Address        1255 FORREST HILL DR  
City-State-Zip: CLEARWATER FL 33756

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:** BARBARA BARBER

**DIRECTOR**

**02/08/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date