## 2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18390

Entity Name: THE CLEARWATER BAR FOUNDATION, INC.

**Current Principal Place of Business:** 

314 S MISSOURI AVENUE, SUITE 107

CLEARWATER, FL 33756

**Current Mailing Address:** 

314 S MISSOURI AVENUE, SUITE 107 CLEARWATER, FL 33756 US

FEI Number: 59-2880867 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FRANCE, KAREN E 314 S MISSOURI AVE, STE 107 CLEARWATER, FL 33756 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** Feb 19, 2015

**Secretary of State** 

CC4703532735

Officer/Director Detail :

Title **TRUSTEE** Title **TREASURER** BURNS, JENNIFER A Name Name PAXTON, ANN

250 N BELCHER RD, SUITE 102 29750 US HIGHWAY 19 NORTH Address Address

CLEARWATER FL 33761 CLEARWATER FL 33765 City-State-Zip: City-State-Zip:

Title **SECRETARY** Title **PRESIDENT** 

Name REIGHARD, KRISTINE M SCHILTZ, SCOTT E Name

Address 900 DREW ST. Address 1968 BAYSHORE BOULEVARD

CLEAWRATER FL 33755 City-State-Zip: City-State-Zip: DUNEDIN FL 34698

Title TRUSTEE Title **TRUSTEE** 

Name BROADWAY-RENDON, SHERRIE L HITCHCOCK, STEVEN E Name

Address 32845 US HIGHWAY 19 901 CHESTNUT ST Address

SUITE B City-State-Zip: PALM HARBOR FL 34684

City-State-Zip: CLEARWATER FL 33756

Title TRUSTEE Title TRUSTEE CARSON, COLLEEN A.

Name ZUROWESTE, ZACKARY 13577 FEATHER SOUND DR. Address

Address 2555 ENTERPRISE RD SUITE 500

SUITF 15 City-State-Zip:

CLEARWATER FL 33762 CLEARWATER FL 33763 City-State-Zip:

Continues on page 2

Name

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.

02/19/2015 SIGNATURE: SCOTT E SCHILTZ **PRESIDENT** 

Electronic Signature of Signing Officer/Director Detail

Date

## Officer/Director Detail Continued:

Title TRUSTEE

Name IDRIZI, SHPRESA

Address 3005 STATE ROAD 590

SUITE 202

City-State-Zip: CLEARWATER FL 33759

Title TRUSTEE

Name PARRI, DANIEL C

Address 1217 PONCE DE LEON BLVD

City-State-Zip: CLEARWATER FL 33756

Title TRUSTEE

Name ECKARD, ROBERT D

Address 3110 ALT. US 19 N

SUITE A

City-State-Zip: PALM HARBOR FL 34683