

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N22474

**Entity Name:** CLEARWATER BEACH SUITES CONDOMINIUM ASSOCIATION, INC.

**FILED**  
**Mar 05, 2015**  
**Secretary of State**  
**CC0590922848**

**Current Principal Place of Business:**

530 MANDALAY AVENUE  
CLEARWATER BEACH, FL 33767

**Current Mailing Address:**

1623 WINDSOR PLACE  
CLEARWATER, FL 33755

**FEI Number: 59-2852132**

**Certificate of Status Desired: No**

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

NIURKA FERNANDEZ ASMER,ESQ.  
113 S. BOULEVARD, 1ST FLOOR  
TAMPA, FL 33605 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           | P                   | Title           | VP                  |
| Name            | HIGDON, MICHAEL     | Name            | HEINZE, NATHAN      |
| Address         | 1623 WINDSOR PL     | Address         | 2729 VIA MURANO     |
| City-State-Zip: | CLEARWATER FL 33755 | City-State-Zip: | CLEARWATER FL 33764 |
|                 |                     |                 |                     |
| Title           | ST                  |                 |                     |
| Name            | HIGDON, NINA        |                 |                     |
| Address         | 1623 WINDSOR PLACE  |                 |                     |
| City-State-Zip: | CLEARWATER FL 33755 |                 |                     |

*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: MICHAEL HIGDON**

**PRESIDENT**

**03/05/2015**

Electronic Signature of Signing Officer/Director Detail

Date