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Secretary of State

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NONPROFIT CORPORATION
 ANNUAL REPORT
 1999

FLORIDA DEPARTMENT OF STATE
 Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

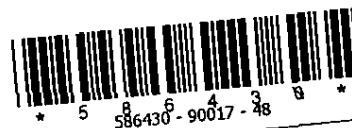
DOCUMENT # 701729

1. Corporation Name

Unitarian Universalist Church of Clearwater, Florida

Principal Place of Business

Mailing Address

2470 Nursery Road
Clearwater, FL 33764

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21		26		November 28, 1960	
Suits, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22		27		59-0995436	
City & State		City & State		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
23		28		6. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees	
Zip		Country		Trust Fund Contribution	
24		25		29	
30		31		32	

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

William Norsworthy
2545 Knotty Pine Way
Clearwater, FL 33761

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

2494 Bayshore Boulevard

83

84 City

Dunedin

FL

85 Zip Code
34698

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when re-registering)

DATE

5/23/99

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	President <input checked="" type="checkbox"/> DELETE	1.1 TITLE	President "T" <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Marilyn Oberle	1.2 NAME	Elly Kelly Baker <i>Elly Kelly Baker</i>
STREET ADDRESS	2011 Gulf Boulevard, #1B	1.3 STREET ADDRESS	P.O. Box 1416 4107 Florida Ave, N. Port Richey, FL 34652
CITY-ST-ZIP	Indian Rocks Beach, FL 33785	1.4 CITY-ST-ZIP	New Port Richey, FL 34652
TITLE	President Elect <input checked="" type="checkbox"/> DELETE	2.1 TITLE	President Elect "T" <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Elly Kelly Baker	2.2 NAME	Gareth Whitehurst
STREET ADDRESS	P.O. Box 1416	2.3 STREET ADDRESS	8788 60th Street, North
CITY-ST-ZIP	New Port Richey, FL 34656	2.4 CITY-ST-ZIP	Pinellas Park, FL 33782
TITLE	Past President <input checked="" type="checkbox"/> DELETE	3.1 TITLE	Past President "T" <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Dorothy Wylie	3.2 NAME	Dorothy Wylie
STREET ADDRESS	7041 Morningstar Lane	3.3 STREET ADDRESS	7041 Morningstar Lane
CITY-ST-ZIP	New Port Richey, FL 34652	3.4 CITY-ST-ZIP	New Port Richey, FL 34652
TITLE	Treasurer <input checked="" type="checkbox"/> DELETE	4.1 TITLE	Treasurer "T" <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Simon Jackel	4.2 NAME	Eleanor Rogers
STREET ADDRESS	684 Hidden Lake Drive	4.3 STREET ADDRESS	2687 Sabal Springs Circle, #101
CITY-ST-ZIP	Tarpon Springs, FL 34689	4.4 CITY-ST-ZIP	Clearwater, FL 33761
TITLE	Secretary <input checked="" type="checkbox"/> DELETE	5.1 TITLE	Secretary "T" <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Janet Judge	5.2 NAME	Shirley Law
STREET ADDRESS	9241 Merrimoor Boulevard	5.3 STREET ADDRESS	860 Virginia Street, #202
CITY-ST-ZIP	Largo, FL 33777	5.4 CITY-ST-ZIP	Dunedin, FL 34698
TITLE	Director <input checked="" type="checkbox"/> DELETE	6.1 TITLE	Director <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Donald Ekberg	6.2 NAME	Marilyn Oberle
STREET ADDRESS	1376 Ambassador Drive	6.3 STREET ADDRESS	2011 Gulf Boulevard, #1B
CITY-ST-ZIP	Clearwater, FL 33764	6.4 CITY-ST-ZIP	Indian Rocks Beach, FL 33785

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: ELEANOR L. ROGERS Eleanor L. Rogers 5/26/99 1727724-3499

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (1/98)