

2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 701729

FILED
Sep 29, 2005
Secretary of State

Entity Name: THE UNITARIAN UNIVERSALISTS OF CLEARWATER, FLORIDA, INC.

Current Principal Place of Business:

2470 NURSERY RD
CLEARWATER, FL 33764

New Principal Place of Business:

Current Mailing Address:

2470 NURSERY RD
CLEARWATER, FL 33764

New Mailing Address:

FEI Number: 59-0995436

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STAPLETON, TERRENCE
2494 BAYSHORE BOULEVARD
DUNEDIN, FL 34698 US

Name and Address of New Registered Agent:

BUCKLAND, BARBARA E
2470 NURSERY ROAD
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: BARBARA E. BUCKLAND

09/29/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: STAPLETON, TERRY
Address: 580 S FLORIDA AVENUE
City-St-Zip: TARPON SPRINGS, FL 34689

Title: PE () Delete
Name: NORSWORTHY, BILL
Address: 9100 9TH STREET NORTH #1606
City-St-Zip: ST PETERSBURG, FL 3302

Title: S () Delete
Name: MCGIVERIN, PAT
Address: 1529 DORCHESTER DRIVE
City-St-Zip: PALM HARBOR, FL 34684

Title: T () Delete
Name: SUGGS, KEN
Address: 1915 ORO COURT
City-St-Zip: CLEARWATER, FL 33764

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: NORSWORTHY, BILL
Address: 2470 NURSERY ROAD
City-St-Zip: CLEARWATER, FL 33764

Title: PE (X) Change () Addition
Name: HAMILTON, TIM
Address: 2470 NURSERY ROAD
City-St-Zip: CLEARWATER, FL 33764

Title: S (X) Change () Addition
Name: DASSING, TERI
Address: 2471 NURSERY ROAD
City-St-Zip: CLEARWATER, FL 33764

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: BARBARA E. BUCKLAND

ADMI

09/29/2005

Electronic Signature of Signing Officer or Director

Date