

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 710736

FILED
May 08, 2005
Secretary of State

Entity Name: CLEARWATER FRIENDS' MEETING, INC.

Current Principal Place of Business:

8333 SEMINOLE BLVD., #439
SEMINOLE, FL 34642

New Principal Place of Business:

Current Mailing Address:

C/O NJ JONES
13464 TWIG TERR.
LARGO, FL 33774

New Mailing Address:

FEI Number: 51-0175760 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

HUBBARD, JOHN G., ESQ.
1059 BROADWAY, SUITE B
DUNEDIN, FL 33528 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: RCD () Delete
Name: STRATHIE, D. ANNE
Address: 12121 VONN RD #211
City-St-Zip: LARGO, FL 33774

Title: CD () Delete
Name: FLANERY, MICHAEL
Address: 1836 VENETIAN ST. DR.
City-St-Zip: CLEARWATER, FL 337551752

Title: TD () Delete
Name: HUBBARD, NYLA JO
Address: 13464 TWIG TERR.
City-St-Zip: LARGO, FL 33774

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: CD (X) Change () Addition
Name: DAY, PETER
Address: 8200 TARSIER AV
City-St-Zip: NEW PORT RIC, FL 336536559

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: NYLA J HUBBARD

TREA

05/08/2005

Electronic Signature of Signing Officer or Director

Date