

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 710736

FILED  
Feb 03, 2009  
Secretary of State

Entity Name: CLEARWATER FRIENDS' MEETING, INC.

**Current Principal Place of Business:**

8200 TARSIER AVE  
NEW PORT RICHEY, FL 336536559

**New Principal Place of Business:**

**Current Mailing Address:**

C/O JIM DICKINSON 644 ISLAND WAY  
308.  
CLEARWATER, FL 337671909

**New Mailing Address:**

FEI Number: 51-0175760

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**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: DAY, PETER  
Address: 8200 TARSIER AV  
City-St-Zip: NEW PORT RIC, FL 336536559

Title: TD ( ) Delete  
Name: DICKINSON, JAMES E  
Address: 644 ISLAND WAY UNIT 308  
City-St-Zip: CLEARWATER, FL 337671909

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: RCD (X) Change ( ) Addition  
Name: ZINGARO, EILEEN  
Address: 1949 PROMENADE WAY  
City-St-Zip: CLEARWATER, FL 337601735 US

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

Title: TD (X) Change ( ) Addition  
Name: DICKINSON, JAMES E  
Address: 644 ISLAND WAY UNIT 308  
City-St-Zip: CLEARWATER, FL 337671909 US

Title: ACD ( ) Change (X) Addition  
Name: FLANERY, MICHAEL  
Address: 1836 VENETIAN POINT DR.  
City-St-Zip: CLEARWATER, FL 337551752 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: JAMES E DICKINSON

TD

02/03/2009

Electronic Signature of Signing Officer or Director

Date