

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 713569

FILED
Sep 06, 2006
Secretary of State

Entity Name: CLEARWATER AUTOMOBILE DEALERS ASSOCIATION, INC.

Current Principal Place of Business:

PO BOX 5012
CLEARWATER, FL 33758 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 5012
CLEARWATER, FL 33758 US

New Mailing Address:

FEI Number: 59-1936411 **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:

BAXTER, JAMES A.
BAXTER & RINARD, P.A.
220 SOUTH GARDEN AVE.
CLEARWATER, FL 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: PD () Delete
Name: RODGERS, LARRY
Address: 18911 US 19 N
City-St-Zip: CLEARWATER, FL 33764

Title: VPD () Delete
Name: ZARALBAN, RUSSELL
Address: 21154 US 19 N
City-St-Zip: CLEARWATER, FL 33765

Title: STD () Delete
Name: MUELLER, RON
Address: 13525 US 19 N
City-St-Zip: CLEARWATER, FL 33764

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ZARALBAN, RUSSELL
Address: 21154 US 19 N
City-St-Zip: CLEARWATER, FL 33765

Title: VPD (X) Change () Addition
Name: MUELLER, RON
Address: 13525 US 19 N
City-St-Zip: CLEARWATER, FL 33764

Title: STD (X) Change () Addition
Name: PILATO, SAM
Address: 25485 US 19 N
City-St-Zip: CLEARWATER, FL 33763

I hereby certify that the information supplied with this filing does not qualify for the 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: RUSSELL ZARALBAN

PD

09/06/2006

Electronic Signature of Signing Officer or Director

Date