2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#713628

FILED Feb 26, 2008 Secretary of State

Entity Name: CLEARWATER BREAKFAST SERTOMA CLUB, INC.

Current Principal Place of Business: New Principal Place of Business: 301 JASMINE WAY CLEARWATER, FL 33756 US **Current Mailing Address: New Mailing Address:** 301 JASMINE WAY CLEARWATER, FL 33756 US FEI Number: 59-6211871 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: JAMIESON, HARRY B 301 JASMINE WAY CLEARWATER, FL 34698 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: COBD (X) Change () Addition () Delete MATHENY, MARK LYKES, CHARLES Name: Name: 3342 DUNWOODY CT Address: 501 S FT HARRISON AVE SUITE 101 Address: City-St-Zip: CLEARWATER, FL 33761 City-St-Zip: CLEARWATER, FL 33756 Title: PD () Delete Title: () Change () Addition LYKES, CHARLES Name: Name: Address: 501 S FT HARRISON AVE SUITE 101 Address: City-St-Zip: CLEARWATER, FL 33756 City-St-Zip: Title: VPD () Delete Title: () Change () Addition WEIDEMEYER, C.I. Name: Name: 501 S. FT.HARRISON AVE., STE. 1 Address: Address: City-St-Zip: CLEARWATER, FL 33756 City-St-Zip: () Delete Title: VPD Title: () Change () Addition PAUL, JEFF Name: Name: 8 OAK LEAF COURT Address: Address: City-St-Zip: SAFETY HARBOR, FL 34695 City-St-Zip: Title: () Delete Title: () Change () Addition JAMIESON, HARRY Name: Name: 301 JASMINE WAY Address: Address: City-St-Zip: CLEARWATER, FL 33756 City-St-Zip: Title: () Delete Title: () Change () Addition ROBBINS, RICHARD Name: Name: Address: 1230 S MYRTLE AVE SUITE 302 Address: CLEARWATER, FL 33756 City-St-Zip: City-St-Zip:

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: HARRY JAMIESON TD 02/26/2008