## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

SIGNATURE:

DOCUMENT # 717764

(5)

CLEARWATER COMMUNITY CHURCH, INC.					 		
Principal Place	of Rusiness	Mailing Address					
2897 BELCHE		ū					
PALM HARBO	/- <del>-</del>	PALM HARBOR F 34683	2897 BELCHER RD PAI M HARROR F 34683				
US		US					
					<ol> <li>Date Incorporated or Qualified</li> <li>12/22/1969</li> </ol>	3a. Date of Last Report 05/01/1995	
2. Principal Pla	ace of Business	2a. Mailing Address			4. FEI Number	Applied For	
21 26		26			59-1311051	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional	
City & State	9	<del></del>	City & State		6 Station Commission Singuistry	Fee Required	
23		28	<b></b>		6. Election Campaign Financing Trust Fund Contribution	S5.00 May Be Added to Fees	
Zip	Country	Zip	Countr	у	8. This corporation has liability for in-		
24	25	29	30		Florida Statutes	Yes □ No	
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Re	gistered Agent	
PAATEA	DIOLLADO		B1	l Name			
FOSTER, RICHARD			Ba	82 Street Address (P.O. Box Number is Not Acceptable)			
713 COUNTRYSHIRE LANE PALM HARBOR FL 34683			83	<del> </del>			
FALM 11/	4000 FL 34003		L"				
			84	City		FL 85 Zip Code	
11. Pursuant t	to the provisions of Sections 617.050	2 and 617.1508, Florida Statutes	s, the above	named corp	poration submits this statement for the purp		
or register familiar wit	ed agent, or both, in the State of Flor th, and accept the obligations of, Sec	rida. Such change was authorize stion 617.0503, Florida Statutes.	d by the con	poration's bo	coration submits this statement for the purpoard of directors. I hereby accept the appoin	ntment as registered agent. I am	
SIGNATURE _							
12.	Signature, typed or printed name of registered age	nt and title if applicable (NOT ND DIRECTORS	E: Registered Age	ent signature reck	ired when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE	
TITLE	CD	DELETE	1.1 TITLE	П	D ADDITIONS/CHANGES TO OFFICE	Change Addition	
NAME	CANON, BARRY		1.2 NAME		ANON, BAPRY	Zenango [] Zeditton	
STREET ADDRESS	406 HILLSBOROUGH ST			T ADDRESS	406 HILLSBOROUGH ST.		
CITY - ST - ZIP	PALM HARBOR FL		1.4 CITY-		PACM HUMBOR, 7L 34683		
TITLE	D\$	<b>X</b> DELETE	2.1 TITLE		CO	Change Addition	
NAME	Brown, Ron	•	2.2 NAME		HARDLD WEYAND		
STREET ADDRESS	7965 COTTONWOOD DR		2.3 STREE		2119 RIVERS EASE CT.		
CITY-ST-ZIP	LARGO FL		2. 4 CITY-		CLIARUMEN, 71 34623		
TITLE	ODAMIEN BIID	<b>X</b> DELETE	3.1 TITLE		DT COMMS!	Change Addition	
NAME .	Gramley, BUD 2751 Regency Oaks BlvD	D.100	3.2 NAME		WANE POMMEL 1980 MUDON HILL DR.		
STREET ADDRESS CITY-S1-ZIP	CLEARWATER FL	N-102		ة ا	CEARWARER, FL 3821		
TITLE	D	DELETE	3.4. CITY - 4.1 TITLE	-51-217	to the state of th	☐ Change ☐ Addition	
NAME	FOSTER, R.		4. 2 NAME			Fill Assemble Fill Legition	
STREET ADDRESS	713 COUNTRYSHIRE LN			T ADDRESS			
CITY-ST-ZiP	PALM HARBOR FL		4.4 CITY -				
TITLE	D	DELETE	5.1 TITLE	·		Change Addition	
NAME	BENTZEL, TOM		5.2 NAME				
STREET ADDRESS	1011 DUNCAN AVE S		5.3 STREE	T ADDRESS			
CITY-ST-ZIP	CLEARWATER FL	Files	5.4 CITY -	ST-ZIP			
TITLE		DELETE	6.1 TITLE			Change Addition	
NAME STUCKS ADODESC			6.2 NAME				
STHEET ADDRESS  CITY-ST-ZIP				T ADDRESS			
14. I do hereb	y certify that the information supplied	with this filing is voluntarily furnis	6.4 CITY - shed and do	es not qualif	for the exemption stated in Section 119.0	7(3)(k), Florida Statutes. I further	
certify that oath: that	t the information indicated on this ann Lam an officer or director of the corn	iual report or supplemental annu- oration or the receiver or trustee	al report is tr empowered	ue and accu	rate and that my signature shall have the sa this report as required by Chapter 617, Flori	ame legal effect as if made under	
appears in	Block 12 or Block 13 if changed, or	on an attachment with an addre	SS.		and the second of the second o	Sa Salaton, and dealthy hairle	

Daytime Phone #

PUD. Jet 1-31-96
PHATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR