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FILED

Mar 03 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 717764 (5)

1. Corporation Name

CLEARWATER COMMUNITY CHURCH, INC.

Principal Place of Business

2897 BELCHER RD
PALM HARBOR FL 34683
US

Mailing Address

2897 BELCHER RD
PALM HARBOR F 34683-7108
US3. Date Incorporated or Qualified
12/22/19693a. Date of Last Report
02/09/1996

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

30 Country

4. FEI Number

59-1311051

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution\$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FOSTER, RICHARD
713 COUNTRYSHIRE LANE
PALM HARBOR FL 34683

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	D	☒ DELETE
NAME	CANON, BARRY	
STREET ADDRESS	408 HILLSBOROUGH ST	
CITY-ST-ZIP	PALM HARBOR FL	
TITLE	CD	☐ DELETE
NAME	WEYAND, HAROLD	
STREET ADDRESS	2119 RIVERS EDGE CT	
CITY-ST-ZIP	CLEARWATER FL	
TITLE	DT	☐ DELETE
NAME	ROMMEL, DUANE	
STREET ADDRESS	2980 MEADOW HILL DR.	
CITY-ST-ZIP	CLEARWATER FL	
TITLE	D	☐ DELETE
NAME	FOSTER, R.	
STREET ADDRESS	713 COUNTRYSHIRE LN	
CITY-ST-ZIP	PALM HARBOR FL	
TITLE	D	☐ DELETE
NAME	BENTZEL, TOM	
STREET ADDRESS	1011 DUNCAN AVE S	
CITY-ST-ZIP	CLEARWATER FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	D	☐ Change ☒ Addition
1.2 NAME	Brown, Ron	
1.3 STREET ADDRESS	2500 Winding Creek Blvd. #E-301	
1.4 CITY-ST-ZIP	Clearwater, FL 34621	
2.1 TITLE	SD	☐ Change ☒ Addition
2.2 NAME	Finn, Dennis	
2.3 STREET ADDRESS	1985 Fishermens Bend	
2.4 CITY-ST-ZIP	Palm Harbor, FL 34685	
3.1 TITLE	D	☐ Change ☒ Addition
3.2 NAME	John Patrick	
3.3 STREET ADDRESS	1527 Sandalwood Dr.	
3.4 CITY-ST-ZIP	Dunedin, FL 34698	
4.1 TITLE	D	☐ Change ☒ Addition
4.2 NAME	Watts, Larry	
4.3 STREET ADDRESS	1755 Stable Tr.	
4.4 CITY-ST-ZIP	Palm Harbor, FL 34685	
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/19/97 813 733 5394

Daytime Phone # 0068723

CR2E037 (9/96)