2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 722654

FILED Feb 12, 2009 Secretary of State

Entity Name: CLEARWATER POINT, INC. NO. 5 A CONDOMINIUM

Current Principal Place of Business: New Principal Place of Business: 11350 66TH ST N STE 124 LARGO, FL 33773 **Current Mailing Address: New Mailing Address:** 11350 66TH ST N STE 124 LARGO, FL 33773 FEI Number: 59-1456492 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: HOLIDAY ISLES PROPERTY MGMT., INC. 11350 66TH ST N STE 124 LARGO, FL 33773 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: () Delete () Change () Addition BILL SUCKOW. Name: Name: 825 S. GULFVIEW BLVD., #106 Address: Address: City-St-Zip: CLEARWATER BEACH, FL City-St-Zip: Title: Title: () Delete () Change () Addition DORAN, RUTH Name: Name: Address: 825 S. GULFVIEW BLVD. #107 Address: City-St-Zip: CLEARWATER BCH, FL City-St-Zip: Title: VD () Delete Title: PD (X) Change () Addition CARLEY, JERRY CARLEY, JERRY Name: Name: 825 S GULFVIEW BLVD 204 Address: Address: 825 S GULFVIEW BLVD 204 City-St-Zip: CLEARWATER BEACH, FL 33767 City-St-Zip: CLEARWATER BEACH, FL 33767 Title: Title: VD () Delete (X) Change () Addition Name: BUTTON, PAUL Name: BUTTON, PAUL 825 S. GULFVIEW BLVD #203 825 S. GULFVIEW BLVD #203 Address: Address: City-St-Zip: CLEARWATER BEACH, FL 33767 City-St-Zip: CLEARWATER BEACH, FL 33767 Title: () Delete Title: (X) Change () Addition SNIDER, CHERYL SNIDER, CHERYL Name: Name: 825 S. GULFVIEW BLVD. #308 825 S. GULFVIEW BLVD. #308 Address: Address: City-St-Zip: CLEARWATER BEACH, FL 33767 City-St-Zip: CLEARWATER BEACH, FL 33767

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: GERALD CARLEY PD 02/12/2009