2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 26, 2009
Secretary of State

DOCUMENT# 730698

Entity Name: CLEARWATER POINT, INC., NO. 7, A CONDOMINIUM

Current Principal Place of Business:

4151 WOODLANDS PKWY
PALM HARBOR, FL 34685

New Principal Place of Business:

Current Mailing Address:

4151 WOODLANDS PKWY
PALM HARBOR, FL 34685

New Mailing Address:

FEI Number: 59-1889696 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

REARDON, MAUREEN C
4151 WOODLANDS PKWY
PALM HARBOR, FL 34685 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:	MICHALEK, RUDY	
Address:	6875 ANGELBLUFF CIR.	
City-St-Zip:	DALLAS, TX 75248	
Title:	VPD	( ) Delete
Name:	SEILER, KENNETH	
Address:	731 SNUG ISLAND	
City-St-Zip:	CLEARWATER, FL 33767	
Title:	SD	( ) Delete
Name:	WATTS, LUCY	
Address:	855 S. BAYWAY BLVD. #703C	
City-St-Zip:	CLEARWATER BEACH, FL 33767	
Title:	TD	( ) Delete
Name:	COMNINEL, GEORGE	
Address:	851 S. BAYWAY BLVD. #807Y	
City-St-Zip:	CLEARWATER BEACH, FL 33767	
Title:	D	( ) Delete
Name:	WENN, RON	
Address:	697 HIDDEN LAKE DR.	
City-St-Zip:	TARPON SPRINGS, FL 34689	
Title:	D	( ) Delete
Name:	IMREDY, EDITH	
Address:	851 S. BAYWAY BLVD. #701Y	
City-St-Zip:	CLEARWATER, FL 33767	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	SD	(X) Change ( ) Addition
Name:	MAGGANAS, PAULINE	
Address:	851 S. BAYWAY BLVD. #808	
City-St-Zip:	CLEARWATER BEACH, FL 33767	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	D	(X) Change ( ) Addition
Name:	SCHOEN, MICHAEL	
Address:	P.O. BOX 3367	
City-St-Zip:	CLEARWATER BEACH, FL 33767	
Title:		( ) Change ( ) Addition
Name:		
Address:		
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: RUDY MICHALEK PRES 02/26/2009

Electronic Signature of Signing Officer or Director — Date