

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 744168

FILED
Apr 27, 2009
Secretary of State

Entity Name: CLEARWATER USBC WBA, INC.

Current Principal Place of Business:

300 SOUTH DUNCAN AVENUE, STE 217
CLEARWATER, FL 33755

New Principal Place of Business:

300 SOUTH DUNCAN AVENUE, STE 237
CLEARWATER, FL 33755

Current Mailing Address:

300 S. DUNCAN AVE.
SUITE 217
CLEARWATER, FL 33755 US

New Mailing Address:

300 S. DUNCAN AVE.
SUITE 237
CLEARWATER, FL 33755 US

FEI Number: 59-1305014

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WATTS, STEPHEN G.
809 DRUID ROAD EAST
CLEARWATER, FL 33756 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: P () Delete
Name: WILSON, JUDY
Address: 100 HAMPTON ROAD, #98
City-St-Zip: CLEARWATER, FL 33759

Title: VP () Delete
Name: STRATTON, HILDA
Address: 1985 OAK ST
City-St-Zip: CLEARWATER, FL 33760

Title: VP () Delete
Name: BATES, M JOANNE
Address: 1785 TOWNSEND ST
City-St-Zip: CLEARWATER, FL 33755

Title: AM () Delete
Name: SPICER, LINDA
Address: P. O. BOX 2635
City-St-Zip: LARGO, FL 33779

Title: VP () Delete
Name: KIMBRELL, WAYNETTA
Address: 2774 PEACHTREE CIR
City-St-Zip: CLEARWATER, FL 33761

Title: T () Delete
Name: ADAMS, MILLIE
Address: 2655 NEBRASKA RD #306
City-St-Zip: PALM HARBOR, FL 34684

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: KIMBRELL, WAYNETTA
Address: 2774 PEACHTREE CI
City-St-Zip: CLEARWATER, FL 33761

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SAR (X) Change () Addition
Name: LAZAR, MARY
Address: 2203 WILLOWBROOK DR
City-St-Zip: CLEARWATER, FL 33764

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: LINDA SPICER

AM

04/27/2009

Electronic Signature of Signing Officer or Director

Date