

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 751094

FILED
Sep 13, 2004
Secretary of State**Entity Name:** CLEARWATER UNITARIAN-UNIVERSALIST CHURCH FOUNDATION, INC.**Current Principal Place of Business:**2470 NURSERY ROAD
CLEARWATER, FL 346242720**New Principal Place of Business:****Current Mailing Address:**2470 NURSERY ROAD
CLEARWATER, FL 346242720**New Mailing Address:****FEI Number:** 59-2085249**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**WINNER, HAROLD
8142 NORWOOD RD.
LARGO, FL 33777 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: VPD () Delete
Name: WINCHESTER, ROBERT
Address: 11200 WADSINGHAM RD. #67A
City-St-Zip: LARGO, FL

Title: D () Delete
Name: EDIE, VIVIAN F
Address: 80 YAWL LANE
City-St-Zip: PALM HARBOR, FL 34683

Title: PD () Delete
Name: WINNER, HAROLD
Address: 8142 NORWOOD RD.
City-St-Zip: LARGO, FL

Title: D () Delete
Name: HEGNER, SUSAN M
Address: 1702 N. OSCEOLA AVE.
City-St-Zip: CLEARWATER, FL

Title: SD () Delete
Name: MARY FLANAGAN,
Address: 2701 REGENCY OAKS BLVD #A-1
City-St-Zip: CLEARWATER, FL 34619

Title: TD () Delete
Name: FRANKLIN, JACK
Address: 856 BETTED KINGFISHER DR S
City-St-Zip: PALM HARBOR, FL 34683

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: HAROLD WINNER

PD

09/13/2004

Electronic Signature of Signing Officer or Director

Date