


# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 02, 2007 8:00 am**  
**Secretary of State**

05-02-2007 90069 034 \*\*\*\*61.25

<b>DOCUMENT # 751094</b> 1. Entity Name CLEARWATER UNITARIAN-UNIVERSALIST CHURCH FOUNDATION, INC.					
Principal Place of Business 2470 NURSERY ROAD CLEARWATER, FL 34624-2720			Mailing Address 2470 NURSERY ROAD CLEARWATER, FL 34624-2720		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		04282007 Chg-NP CR2E037 (12/06)	
Zip		Country		4. FEI Number 59-2085249	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent  WINNER, HAROLD 8142 NORWOOD RD. LARGO, FL 33777				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when re-registering) DATE _____					
<b>Filing Fee is \$61.25 Due by May 1, 2007</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
<b>Make check payable to Florida Department of State</b>					
<b>10. OFFICERS AND DIRECTORS</b>					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD COBIN, DON <input checked="" type="checkbox"/> Delete 1074 MARO DRIVE N.E. SAINT PETERSBURG, FL 33702				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D EDIE, VIVIAN F <input type="checkbox"/> Delete 80 YAWL LANE PALM HARBOR, FL 34683				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD WINNER, HAROLD <input type="checkbox"/> Delete 8142 NORWOOD RD. LARGO, FL				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <i>FA - spelling change</i> <input type="checkbox"/> Delete DAVIS, MARIONNE 860 VIRGINIA STREET, # 203 DUNEDIN, FL 34698				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD <input checked="" type="checkbox"/> Delete MARY FLANAGAN 2701 REGENCY OAKS BLVD #A-1 CLEARWATER, FL 34619				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete FRANKLIN, JACK 856 BETTED KINGFISHER DR S PALM HARBOR, FL 34683				
<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	President/Director <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Richard Poffes 486 24th Ave N, St. Petersburg, FL 33704				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President/Director <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Donald Ekberg 1376 Ambassador Drive Clearwater, FL 33764				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer/Director <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Winner, Harold 8142 Norwood Rd. Largo, FL 33777				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary/Director <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition John Brunell 1116 Briwell Court Trinity, FL 34655				
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
<b>SIGNATURE:</b> <i>Harold J Winner</i> <b>Harold J Winner</b> <i>4/27/07</i> <b>227 824-8774</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					