


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 10, 2006 08:00 AM
Secretary of State

DOCUMENT # 760174
 1. Entity Name
CLEARWATER POINT, INC., NO. 8



Principal Place of Business Mailing Address
800 S. GULFVIEW BLVD **800 S. GULFVIEW BLVD**
CLEARWATER FL 33767 **CLEARWATER FL 33767**

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country



1st MOORE CR2E037 (10/05)

4. FEI Number Applied For
59-2223760 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CIANFRONE, JOE
1968 BAYSHORE BLVD
STE 840
DUNEDIN FL 34698

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 reinstating)
 Signature typed in printed name of registered agent and title if applicable DATE _____

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	S	<input type="checkbox"/> Delete
NAME	HYNES, KEN	
STREET ADDRESS	800 S GULFVIEW BLVD., #807	
CITY-ST-ZIP	CLEARWATER FL 33767	
TITLE	TD	<input type="checkbox"/> Delete
NAME	ALBRECHT, CLIFF	
STREET ADDRESS	830 S GULFVIEW BLVD #705	
CITY-ST-ZIP	CLEARWATER FL 33767	
TITLE	VP	<input type="checkbox"/> Delete
NAME	BLACK, LES	
STREET ADDRESS	830 S GULFVIEW BLVD #503	
CITY-ST-ZIP	CLEARWATER FL 33767	
TITLE	D	<input type="checkbox"/> Delete
NAME	PIERCE, ANGE	
STREET ADDRESS	830 S. GULFVIEW BLVD. #702	
CITY-ST-ZIP	CLEARWATER FL 33767	
TITLE	P	<input type="checkbox"/> Delete
NAME	PAZAN, PAUL	
STREET ADDRESS	800 S GULFVIEW BLVD #907	
CITY-ST-ZIP	CLEARWATER FL 33767	
TITLE	T	<input type="checkbox"/> Delete
NAME	TRUHLAR, RON	
STREET ADDRESS	800 S GULFVIEW BLVD #604	
CITY-ST-ZIP	CLEARWATER FL 33767	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Add
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Add
NAME		
STREET ADDRESS		
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TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Add
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TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Add
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

U00000501445
 04/25/06-80063-011 61.25

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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.