2003 NOT-FOR-PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # 760494

1. Entity Name

CLEARWATER AQUATICS BOOSTERS, INC.



FILED Apr 04, 2003 8:00 am Secretary of State

04-04-2003 90061 013 ****61.25



			See Wi								
C/O MAUREEN JOHNSTON C/O		Mailing Address C/O MAUREEN JOHNSTON 1630 PINEWOOD DR									
CLEARWATER US		CLEARWATER FL 33765 US									
2. Principal P	Place of Business AVL ANDE/SW	3. Mailing Address	MESON								
Suite, Apt. #, etc. 2186 Gipress PT. Dr. N. 2		Suite, Apt. #, etc.	Suite, Apt. #, etc. 186 Cy press PT. Dr. N.		CHECK HERE IF MAKING CHANGES						
City & Stat	9	CIENT WATE	•	, ,	4. FEI Number 50	-2169574	•	'⊢—	plied For		
Zip	ACWOTER, FL.	Zip	Country		5. Certificate of Sta	atus Desired		8.75 Add	ditional		
3374		33763	<u>لك</u>				F	ee Require	d		
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent							
STUART	RODERICK B				ERSON	PAUL					
-	GEWOOD ST		Street At	.186 -186	O. Box Number is N. کی ایم	S PT	Dr. N	•			
CLEARW	ATER FL 33755			•	<i>J</i> •						
*			<u></u> .		Arwatte		FL		63		
	named entity submits this statement for ions of registered agent.	the purpose of changing its re	gistered office or	r registere	ed agent, or both, in	the State of Floo	rida. I am fa	miliar with,	and accept		
	Paul M.						/- /				
SIGNATURE .	Signature, typed or printed name of registered agent as	egistered Agent signatu	ure required	when reinstating)	-5/	JON JONE	3003	·			
FILE NOW: FEE IS \$61.25		0 Floation Comp	-: F:		I	86-1	AlI-				
	FILE NOW: FEE IS \$61.25	9. Election Camp Trust Fund Cor			\$5.00 May Be Added to Fees		ke Check la Departr				
' <u>4</u>	`	Trust Fund Cor	tribution.	⊔ ———	Added to Fees	Florid	la Departr	nent of S	State		
	OFFICERS AND DIR	Trust Fund Cor		⊔ ———		Florid	la Departr	nent of S	State		
10.	OFFICERS AND DIR	Trust Fund Cor	tribution.	⊔ ———	Added to Fees	Florid	la Departr	nent of S	State 10		
10. TITLE (NAME STREET ADDRESS	OFFICERS AND DIR D BIONDI, JAMIE 215 ELIZABETH AVE S	Trust Fund Cor	11. TITLE NAME STREET ADDRESS	⊔ ———	Added to Fees	Florid	la Departr	nent of S	State 10		
10. TITLE f	OFFICERS AND DIR D BIONDI, JAMIE 215 ELIZABETH AVE S CLEARWATER FL 33759	Trust Fund Cor	11. TITLE NAME	A	Added to Fees	Florid	A Departr	ment of S CTORS IN Change	10 Addition		
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12. I hereby certify that the information supplied with this filling does not qualify 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 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.

SIGNATURE:

MPAREQUEED

3/30/2023

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