

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 763544

FILED  
Apr 15, 2007  
Secretary of State

**Entity Name:** CLEARWATER CHARGERS SOCCER CLUB, INC.

**Current Principal Place of Business:**

3050 DREW STREET  
CLEARWATER, FL 33759 US

**New Principal Place of Business:**

**Current Mailing Address:**

880 BAY ESPLANADE  
CLEARWATER, FL 33767 US

**New Mailing Address:**

**FEI Number:** 59-2210194      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CATHERINE WEATHERILT  
880 BAY ESPLANADE  
CLEARWATER, FL 33767 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: ROB O'NAN,  
Address: 6923 SPANISH MOSS CIRCLE  
City-St-Zip: TAMPA, FL

Title: SD ( ) Delete  
Name: CAMPORINI, PAUL  
Address: 1115 WOODCREST AVENUE  
City-St-Zip: SAFETY HARBOR, FL 34695

Title: V ( ) Delete  
Name: KIMBRELL, STEVE  
Address: 1924 HARDING STREET  
City-St-Zip: CLEARWATER, FL 33765

Title: TD ( ) Delete  
Name: WEATHERILT, CATHY,  
Address: 880 BAY ESPLANADE  
City-St-Zip: CLEARWATER, FL

Title: D ( ) Delete  
Name: PARKER, SANDY  
Address: 1723 OAKDALE LANE E  
City-St-Zip: CLEARWATER, FL 33764

**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:

I hereby certify that the information supplied with this filing does not qualify for the 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: CATHY WEATHERILT

TD

04/15/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date