

# 2002 UNIFORM BUSINESS REPORT (UBR)

FILED

May 22, 2002 8:00 am  
Secretary of State

05-22-2002 90100 049 \*\*\*\*70.00

DOCUMENT # N00000004279

1. Entity Name

NEW GROWTH COMMUNITY DEVELOPMENT CORPORATION

Principal Place of Business

Mailing Address

2936 TANGLEWOOD DR. NOS. I & J  
CLEARWATER FL 33759

P. O. BOX 17822  
CLEARWATER FL 33762

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3654161

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired



\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CUTLIFF, YATE K  
501 FIRST AVE. NORTH, SUITE 507  
ST. PETERSBURG FL 33701

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

Make Check Payable to  
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D ☒ Delete  
NAME SMITH, GEORGE  
STREET ADDRESS 975 20TH ST. SOUTH  
CITY-ST-ZIP ST. PETERSBURG FL 33712

TITLE C/D ☐ Change ☒ Addition  
NAME CHARLES BRUNNER  
STREET ADDRESS 2990 Tanglewood Dr. So.  
CITY-ST-ZIP Clearwater, FL 33759

TITLE D ☒ Delete  
NAME PEARSON, NORMAN P JR.  
STREET ADDRESS 3620 41ST WAY SOUTH, UNIT 73B  
CITY-ST-ZIP ST. PETERSBURG FL 33711

TITLE P/D ☒ Change ☐ Addition  
NAME Norman Pearson  
STREET ADDRESS 5135 # 96 Foxbridge Cir  
CITY-ST-ZIP Clearwater, FL 33760

TITLE D ☒ Delete  
NAME PEARSON, CLARICE  
STREET ADDRESS 3620 41ST-WAY-SOUTH, UNIT 73B  
CITY-ST-ZIP ST. PETERSBURG FL 33712

TITLE V/C/D ☐ Change ☐ Addition  
NAME Sheryl Williams  
STREET ADDRESS 2960 Tanglewood Dr. Bldg. #  
CITY-ST-ZIP Clearwater, FL 33759

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE S/D ☐ Change ☐ Addition  
NAME Nancy Bevers  
STREET ADDRESS 8960 Tanglewood Dr. Bldg. G  
CITY-ST-ZIP Clearwater FL 33759

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D ☐ Change ☒ Addition  
NAME LARON BARBEN  
STREET ADDRESS 110 E. Grapefruit Circle  
CITY-ST-ZIP Clearwater, FL 33759

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE T/D ☐ Change ☒ Addition  
NAME Jose Torres  
STREET ADDRESS 101 K Sandlewood Dr  
CITY-ST-ZIP Clearwater FL 33759

12. I hereby certify that the information supplied with this filing 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:

*Norman Pearson* RE: NORMAN PEARSON 4/30/02 (722) 712-9003

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)