

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000007170

FILED  
Apr 21, 2009  
Secretary of State

**Entity Name:** CLEARWATER HIGH SCHOOL BATTER-UP CLUB, INC.

**Current Principal Place of Business:**

540 S. HERCULES AVE.  
CLEARWATER HIGH SCHOOL  
CLEARWATER, FL 33764

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 4933  
CLEARWATER, FL 33758

**New Mailing Address:**

**FEI Number:** 59-3517018

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GOODMAN, JAYNE A  
425 FEATHER TREE DRIVE  
CLEARWATER, FL 33765 US

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

JAMES, DEBRA  
2101 DRUID RD E  
CLEARWATER, FL 33764 US

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: DEBRA J JAMES

04/21/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PRES ( ) Delete  
Name: GOODMAN, JAYNE A  
Address: 425 FEATHER TREE DRIVE  
City-St-Zip: CLEARWATER, FL 33765 US

Title: VP ( ) Delete  
Name: KIM, BOOTH  
Address: 1761 GREAT BRIKHILL RD  
City-St-Zip: CLEARWATER, FL 33755 US

Title: TRES ( ) Delete  
Name: YOUNGER, DEBBIE  
Address: 307 FEATHER TREE DR.  
City-St-Zip: CLEARWATER, FL 33765 US

Title: SEC (X) Delete  
Name: EASTMAN, DEBBIE  
Address: 1874 FEATHER TREE CIRCLE  
City-St-Zip: CLEARWATER, FL 33765 US

Title: PRES (X) Delete  
Name: O'BRIEN, MARTIN  
Address: 1351 HIGHFIELD DR  
City-St-Zip: CLEARWATER, FL 33764

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PRES (X) Change ( ) Addition  
Name: O'BRIEN, MARTIN  
Address: 1351 HIGHFIELD DR  
City-St-Zip: CLEARWATER, FL 33764 US

Title: VP (X) Change ( ) Addition  
Name: MOLINARO, JOE  
Address: 1311 WEBER DRIVE  
City-St-Zip: CLEARWATER, FL 33764 US

Title: TRES (X) Change ( ) Addition  
Name: JAMES, DEBRA J  
Address: 2101 DRUID RD E  
City-St-Zip: CLEARWATER, FL 33764 US

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 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: DEBRA JAMES

TRES

04/21/2009

Electronic Signature of Signing Officer or Director

Date