2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000005005

FILED May 31, 2005 Secretary of State

Entity Name: THE HISTORICAL & CULTURAL SOCIETY OF CLEARWATER, INC.

Current Principal Place of Business: New Principal Place of Business:

405 CLEVELAND ST. CLEARWATER, FL 33755

Current Mailing Address: New Mailing Address:

405 CLEVELAND ST. CLEARWATER, FL 33755

FEI Number: 59-3732719 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

DAVIDSON, ROBERT AUGSTEN, REGINA M

9448 117TH ST. N. 108 24TH ST.

SEMINOLE, FL 33772 US BELLAIR BEACH, FL 33786 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: REGINA M AUGSTEN 05/31/2005

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: D () Delete Title: D (X) Change () Addition

Name: AUGSTEN, REGINA M Name: AUGSTEN, REGINA M

Address: 108 24TH ST. Address: 108 24TH ST.

City-St-Zip: BELLAIR BEACH, FL 33786 City-St-Zip: BELLAIR BEACH, FL 33786 US

Title: D () Delete Title: D (X) Change () Addition Name: PIPPIN, ELIZABETH Name: PIPPIN, ELIZABETH

 Address:
 4509 SHAMROCK RD.
 Address:
 4509 SHAMROCK RD.

 City-St-Zip:
 TAMPA, FL 33611
 City-St-Zip:
 TAMPA, FL 33611 US

 $\label{eq:title:D} {\sf Title:} \qquad {\sf D} \qquad {\sf () Delete} \qquad \qquad {\sf Title:} \qquad {\sf D} \qquad {\sf (X) Change () Addition}$

 Name:
 DAVIDSON, RÖBERT
 Name:
 PAUL, MCKENZIE T

 Address:
 9448 117TH ST. N.
 Address:
 501 116TH AVE N APT#12

 City-St-Zip:
 SEMINOLE, FL 33772
 City-St-Zip:
 ST. PETERSBURG, FL 33716 US

I hereby certify that the information supplied with this filing does not qualify for the 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 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: REGINA M AUGSTEN P 05/31/2005