2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2006
Secretary of State

DOCUMENT# N03000009511

Entity Name: CLEARWATER HIGH SCHOOL PROJECT GRADUATION, INC.

Current Principal Place of Business:

540 SOUTH HERCULES AVE.
CLEARWATER, FL 33764

New Principal Place of Business:

Current Mailing Address:

540 SOUTH HERCULES AVE.
CLEARWATER, FL 33764

New Mailing Address:

FEI Number: 81-0634987 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LA BELLE, RICHARD
3446 LAKE DR.
DUNEDIN, FL 34698 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: D ( ) Delete
Name: SCHMIDT, TERRY
Address: 1408 DOUGLAS DR.
City-St-Zip: CLEARWATER, FL 33756

Title: D (X) Delete
Name: NICHOLS, JAMES
Address: 2137 LAKEVIEW ROAD
City-St-Zip: CLEARWATER, FL 33764

Title: D ( ) Delete
Name: VAN PORTFLIET, ERIC
Address: 1843 JUANITA COURT
City-St-Zip: CLEARWATER, FL 33764

Title: D ( ) Delete
Name: PUMPHREY, SHARON
Address: 1627 WINDSOR DRIVE
City-St-Zip: CLEARWATER, FL 33755

Title: D ( ) Delete
Name: SMITH, THERESA
Address: 2201 HENNESEN DRIVE
City-St-Zip: CLEARWATER, FL 33764

Title: D ( ) Delete
Name: WEAVER, PATRICIA
Address: 2317 GLENMOOR ROAD N
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:

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: TERRY A SCHMIDT D 04/28/2006

Electronic Signature of Signing Officer or Director Date