

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 05, 2006 8:00 am
Secretary of State

05-05-2006 90181 011 ****61.25

DOCUMENT # N05000009201

1. Entity Name
FUTURE VOICES OF CLEARH20 INC.



Principal Place of Business
**361 HANCOCK STREET
DUNEDIN, FL 34698**

Mailing Address
**361 HANCOCK STREET
DUNEDIN, FL 34698**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

05012006 Chg-NP CR2E037 (4/06)

4. FEI Number

EIN 20-3465100

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**TAYLOR, CHANTALA
361 HANCOCK STREET
DUNEDIN, FL 34698**

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE ☐ Delete
NAME **D**
JENKINS, CHAUNCEY
STREET ADDRESS **800 ENGMAN STREET**
CITY-ST-ZIP **CLEARWATER, FL 33755**

TITLE ☐ Delete
NAME **D**
HARRISON, ROCHELLE
STREET ADDRESS **1627 N MADISON AVENUE**
CITY-ST-ZIP **CLEARWATER, FL 33755**

TITLE ☐ Delete
NAME **D**
DAY, KEISHA
STREET ADDRESS **2706 E GRAND RESERVE CIRCLE #1123**
CITY-ST-ZIP **CLEARWATER, FL 33759**

TITLE ☐ Delete
NAME **D**
TAYLOR, CHANTALA
STREET ADDRESS **361 HANCOCK STREET**
CITY-ST-ZIP **DUNEDIN, FL 34698**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☒ Change ☐ Addition
NAME **Jenkins, Chauncey**
STREET ADDRESS **800 Engman Street**
CITY-ST-ZIP **Clearwater, FL 33755**

TITLE ☒ Change ☐ Addition
NAME **Harrison, Rochelle**
STREET ADDRESS **1627 N. Madison Avenue**
CITY-ST-ZIP **Clearwater, FL 33755**

TITLE ☒ Change ☐ Addition
NAME **Day, Keisha**
STREET ADDRESS **2706 E. Grand Reserve Circle #1123**
CITY-ST-ZIP **Clearwater, FL 33759**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

8-25-06 727-479-4950