2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07369

FILED Jan 29, 2009 Secretary of State

Entity Name: CLEARWATER DUPLICATE BRIDGE CLUB, INC.

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

2551 SUNSET POINT ROAD 2ND FLOOR CLEARWATER, FL 33765

New Mailing Address: Current Mailing Address:

2551 SUNSET PT. RD. 2ND FLR CLEARWATER, FL 33765

FEI Number: 59-2495252 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

OWENS, HELEN-JOE P MANAGER 862 CENTERWOOD DR TARPON SPRINGS, FL 34688 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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

PRES () Delete LYDAY, LEON Name: 2741 VIA CIPRIANI #915B Address:

City-St-Zip: CLEARWATER, FL 33764

Title: () Delete O'BRIEN, EDWARD Name: Address: 3376 FERNCLIFF LN. City-St-Zip: CLEARWATER, FL 33761

Title: TRES () Delete PETERSON, SANDRA Name: Address: 14519 EAGLE POINTE DR. CLEARWATER, FL 33762 City-St-Zip:

Title: SECY () Delete Name: WILSON, MARY JANE 1460 OAK HILL DR. APT 101 Address:

DUNEDIN, FL 34698

Title: DIR () Delete

LAU, BOB Name:

City-St-Zip:

City-St-Zip:

1659 HAMILTION CT Address: City-St-Zip: DUNEDIN, FL 34698

Title: () Delete GOLDSCHMIDT, MARK Name: Address: 1624 FARRIER TRAIL CLEARWATER, FL 33765 (X) Change () Addition

Name: O'BRIEN, EDWARD Address: 3376 FERNCLIFF LN City-St-Zip: CLEARWATER, FL 33761

Title: (X) Change () Addition

Name: BAKER, JOE Address: 1481 RIVERDALE DR. City-St-Zip: OLDSMAR, FL 34677

Title: **TRES** (X) Change () Addition

DICKMAN, ED Name: 1310 WOLFORD DR. Address: City-St-Zip: TRINTIY, FL 34655

(X) Change () Addition Title: SECY

Name: KISSEL, JERRY Address: 2982 BUXTON CT. City-St-Zip: CLEARWATER, FL 33761

Title: DIR (X) Change () Addition

LAU, BOB Name:

1659 HAMILTON CT Address: City-St-Zip: DUNEDIN, FL 34698

Title: (X) Change () Addition

NELSON, FRANCES Name: Address: 1324 WOLFORD DR. TRINITY, FL 34655 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: HELEN-JOE OWENS MGR 01/29/2009