

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18390

FILED  
May 01, 2007  
Secretary of State

**Entity Name:** THE CLEARWATER BAR FOUNDATION, INC.

**Current Principal Place of Business:**

314 S MISSOURI AVENUE, SUITE 107  
CLEARWATER, FL 33756 US

**New Principal Place of Business:**

**Current Mailing Address:**

314 S MISSOURI AVENUE, SUITE 107  
CLEARWATER, FL 33756 US

**New Mailing Address:**

**FEI Number:** 59-2880867 **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:**

FRANCE, KAREN E  
314 S MISSOURI AVE, STE 107  
CLEARWATER, FL 33756 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: S ( ) Delete  
Name: MOORE, GARRY R  
Address: 314 S. MISSOURI AVE., SUITE 109  
City-St-Zip: CLEARWATER, FL 33756

Title: T ( ) Delete  
Name: JARDINE, TRACY  
Address: 29605 US HIGHWAY 19 N  
City-St-Zip: CLEARWATER, FL 33761

Title: D ( ) Delete  
Name: COLE, JEWEL W  
Address: 315 COURT STREET  
City-St-Zip: CLEARWATER, FL 33756

Title: P ( ) Delete  
Name: MANNION, ELIZABETH  
Address: 1150 CLEVELAND STREET  
City-St-Zip: CLEARWATER, FL 33755

Title: D ( ) Delete  
Name: IRIZARRY, MYRIAM  
Address: 315 COURT STREET  
City-St-Zip: CLEARWATER, FL 33756

Title: D ( ) Delete  
Name: BRODY, CARL  
Address: 315 COURT STREET  
City-St-Zip: CLEARWATER, FL 33756

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: SHOWERS, GREGORY K  
Address: 133 N FT. HARRISON  
City-St-Zip: CLEARWATER, FL 33755

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 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: ELIZABETH MANNION

P

05/01/2007

Electronic Signature of Signing Officer or Director

Date