

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N25158

FILED
Jan 16, 2007
Secretary of State

Entity Name: CLEARWATER COMMUNITY SAILING ASSOCIATION, INC.

Current Principal Place of Business:

1001 GULF BLVD.
CLEARWATER, FL 33767 US

New Principal Place of Business:

Current Mailing Address:

1001 GULF BLVD.
CLEARWATER, FL 33767 US

New Mailing Address:

FEI Number: 59-2912008

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

KEYSOR, CLARK A
1001 GULF BLVD.
CLEARWATER, FL 33767 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: P () Delete
Name: KEYSOR, CLARK A
Address: 1001 GULF BLVD.
City-St-Zip: CLEARWATER, FL 33767 US

Title: S () Delete
Name: BILLING, DAVID
Address: 1001 GULF BLVD.
City-St-Zip: CLEARWATER, FL 33767 US

Title: T () Delete
Name: DOOLEY, MICHAEL
Address: 1001 GULF BLVD.
City-St-Zip: CLEARWATER, FL 33767 US

Title: D () Delete
Name: MORRIS, BILL
Address: 1001 GULF BLVD.
City-St-Zip: CLEARWATER, FL 33767 US

Title: D () Delete
Name: HUFF, RON
Address: 1001 GULF BLVD.
City-St-Zip: CLEARWATER, FL 33767 US

Title: D () Delete
Name: CALIO, JOSEPH
Address: 1001 GULF BLVD.
City-St-Zip: CLEARWATER, FL 33767 US

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: VP (X) Change () Addition
Name: BOBLENZ, DICK
Address: 1001 GULF BLVD.
City-St-Zip: CLEARWATER, FL 33767 US

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: CLARK A KEYSOR

P

01/16/2007

Electronic Signature of Signing Officer or Director

Date