

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N36488

FILED  
Mar 04, 2008  
Secretary of State

**Entity Name:** CLEARWATER ACADEMY INTERNATIONAL, INC.

**Current Principal Place of Business:**

801 DREW ST  
CLEARWATER, FL 33755 US

**New Principal Place of Business:**

**Current Mailing Address:**

801 DREW ST  
CLEARWATER, FL 33755 US

**New Mailing Address:**

**FEI Number:** 59-2987746

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ZWERS, JIM  
801 DREW ST  
CLEARWATER, FL 33755 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: PD ( ) Delete  
Name: FELDMAN, JEFFREY  
Address: 411 DRUID RD W  
City-St-Zip: CLEARWATER, FL 33756

Title: VD ( ) Delete  
Name: JOHNSON, SUZANNE  
Address: 1000 DRUID ROAD EAST  
City-St-Zip: CLEARWATER, FL 33756

Title: TD ( ) Delete  
Name: GILBERT, JUDY  
Address: 2889 CHELSEA AVE  
City-St-Zip: CLEARWATER, FL 33756

Title: SD ( ) Delete  
Name: FELDMAN, SIKICA  
Address: 411 DRUID RD W  
City-St-Zip: CLEARWATER, FL 33756

Title: M ( ) Delete  
Name: ZWERS, JIM  
Address: 400 N BETTY LN  
City-St-Zip: CLEARWATER, FL 33755

Title: M ( ) Delete  
Name: ZWERS, KATHRIN  
Address: 400 N. BETTY LN  
City-St-Zip: CLEARWATER, FL 33755

**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 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: JIM ZWERS

ED

03/04/2008

Electronic Signature of Signing Officer or Director

Date