



2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 25, 2008 8:00 am
Secretary of State

08-25-2008 90005 013 ****70.00

DOCUMENT # N48660 1. Entity Name KEEP PINELLAS BEAUTIFUL, INC.					
Principal Place of Business 4707 140TH AVE NO. SUITE 214 CLEARWATER, FL 33762 US			Mailing Address 4707 140TH AVE NO. SUITE 214 CLEARWATER, FL 33762 US		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State		08202008 Chg-NP CR2E037 (12/06)	
Zip Country		Zip Country		4. FEI Number 59-3120169	
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required				Applied For Not Applicable	
6. Name and Address of Current Registered Agent SANDERS, WILLIAM M 9925 ULMERTON BLVD LOT 137 LARGO, FL 33770			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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
Filing Fee is \$61.25 Due by September 12, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HELD, FRED JR 7700 SUN ISLAND DRIVE, #601 SOUTH PASADENA, FL 33707	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DON NOLAN 665 CAPRI BLVD TREASURE ISLAND FL 33706	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P STEBELTON, AGNES 1868 SHORE DRIVE S. #311 S. PASADENA, FL 33707	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LOT	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD NERI, RAY 4361 45TH STREET-NO. ST. PETERSBURG, FL	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LOLITA DASH 1523 16th STREET ST PETERSBURG FL 33705	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KIMBALL, RON 4747 47TH AVENUE NORTH SAINT PETERSBURG, FL 33714	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	M SANDERS, WILLIAM M 1530 WINFIELD RD W CLEARWATER, FL 33756	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MALKIN, CAROL 12546 CAPRI CIRCLE TREASURE ISLAND, FL 33706	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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 <i>William M Sanders - William M Sanders</i> Aug 20, 2008 533-0412					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					



4707 140TH Ave N. Suite 214
Clearwater, FL 33762

August 20, 2008

To: Florida Department of State
Secretary of State
Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

To Whom it May Concern,

Enclosed is our Not-For-Profit Corporation Annual Report with a check for \$ 70.00.


Our submittal is late because we overlooked our filing for this year. The notice of intent to dissolve card was discovered while unpacking and shorting files that we taken off five desks in preparation for a possible hurricane (Fay). Our office has floor to ceiling front windows and we must clean off desks, filing baskets and etc in case of those windows being broken by branches off the two large pine trees directly in front of the office. We also place plastic bags over computers and printers.

We are thankful though because it might have a long time before we found two very important mailings that had been put in a "To File for Scrap book basket", mixed with newspaper articles.

It is my understanding that there is no late filing fee. If I am wrong, please send an email regarding a late fee to Stoplitter@aol.com and we will send an additional check.

Again, my sincere apologies for this late submittal.

Sincerely,



William (Bill) Sanders
Executive Director