

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N92000000291

FILED  
Mar 30, 2009  
Secretary of State

Entity Name: CLEARWATER JAZZ HOLIDAY, INC.

## Current Principal Place of Business:

1130 CLEVELAND ST  
STE 1  
CLEARWATER, FL 33755

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 7278  
CLEARWATER, FL 33758 US

## New Mailing Address:

FEI Number: 59-3151781

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FOLSOM, SUSAN  
1130 CLEVELAND ST  
STE 1  
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: P ( ) Delete  
Name: WILLIAM, SMITH  
Address: 1130 CLEVELAND ST, STE 1  
City-St-Zip: CLEARWATER, FL 33755

Title: VP ( ) Delete  
Name: CALLAHAN, SHERRI  
Address: 1130 CLEVELAND ST, STE 1  
City-St-Zip: CLEARWATER, FL 33755

Title: T ( ) Delete  
Name: FOLSOM, SUSAN  
Address: 1130 CLEVELAND ST, STE 1  
City-St-Zip: CLEARWATER, FL 33755

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: SHERRI, CALLAHAN  
Address: 1130 CLEVELAND ST, STE 1  
City-St-Zip: CLEARWATER, FL 33755

Title: VP (X) Change ( ) Addition  
Name: FRANKLIN, CLARK  
Address: 1130 CLEVELAND ST, STE 1  
City-St-Zip: CLEARWATER, FL 33755

Title: VP (X) Change ( ) Addition  
Name: JAY, POLGLAZE  
Address: 1130 CLEVELAND ST, STE 1  
City-St-Zip: CLEARWATER, FL 33755

Title: T ( ) Change (X) Addition  
Name: SUSAN, FOLSOM  
Address: 1130 CLEVELAND ST, STE 1  
City-St-Zip: CLEARWATER, FL 33755

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: SUSAN FOLSOM

T

03/30/2009

Electronic Signature of Signing Officer or Director

Date