

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000000537

FILED
Feb 05, 2009
Secretary of State

Entity Name: DOWNTOWN CLEARWATER FARMER'S MARKET, INC.

Current Principal Place of Business:

301 HILCREST DR. N.
CLEARWATER, FL 33765 US

New Principal Place of Business:

301 HILLCREST DR. N.
CLEARWATER, FL 33765 US

Current Mailing Address:

1006 DREW ST
CLEARWATER, FL 33756 US

New Mailing Address:

FEI Number: 59-3442890 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

WINTERS, ELISE K
1006 DREW STREET
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: DST () Delete
Name: BACKMANN, NANCY
Address: 750 SNUG ISLAND
City-St-Zip: CLEARWATER BEACH, FL 33767

Title: DP () Delete
Name: FERNANDEZ, PATRICIA D
Address: 301 HILLCREST DR. N
City-St-Zip: CLEARWATER, FL 33755

Title: DV () Delete
Name: GAFFNEY, LISA
Address: 519 CLEVELAND STREET # 100
City-St-Zip: CLEARWATER, FL 33755

Title: D () Delete
Name: MATHENY, DWIGHT
Address: 321 MISSOURI AVE. SOUTH
City-St-Zip: CLEARWATER, FL 33756

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DT (X) Change () Addition
Name: BACKMANN, NANCY
Address: 750 SNUG ISLAND
City-St-Zip: CLEARWATER BEACH, FL 33767

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

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

Title: DS (X) Change () Addition
Name: MINOR, ELISABETH
Address: P.O. BOX 4748
City-St-Zip: CLEARWATER, FL 33758

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: PATRICIA D. FERNANDEZ

PRES

02/05/2009

Electronic Signature of Signing Officer or Director

Date