

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N97000002201

FILED  
Apr 30, 2003  
Secretary of State

Entity Name: THE CLEARWATER COMMUNITY VOLUNTEERS, INC.

## Current Principal Place of Business:

308 S LINCOLN #1  
CLEARWATER, FL 33756

## New Principal Place of Business:

1927 SEVER DR  
CLEARWATER, FL 33764

## Current Mailing Address:

308 S LINCOLN #1  
CLEARWATER, FL 33756

## New Mailing Address:

1927 SEVER DR  
CLEARWATER, FL 33764

FEI Number: 59-3442288

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CHAMBERLAIN, KATIE  
308 S LINCOLN #1  
CLEARWATER, FL 33770 US

## Name and Address of New Registered Agent:

SIGAL, JOAN  
1927 SEVER DR  
CLEARWATER, FL 33764 US

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: JOAN SIGAL

04/30/2003

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PT ( ) Delete  
Name: SLAUGHTER, BENNETTA  
Address: 2433 KENT PLACE  
City-St-Zip: CLEARWATER, FL 33764

Title: VT ( ) Delete  
Name: CHAMBERLAIN, KATIE  
Address: 308 S LINCOLN #1  
City-St-Zip: CLEARWATER, FL 33756

Title: VT ( ) Delete  
Name: BARTON, PAM  
Address: 404 JASMINE WAY  
City-St-Zip: CLEARWATER, FL 34610

Title: VT ( ) Delete  
Name: SIGAL, JOAN  
Address: 1927 SEVER DR  
City-St-Zip: CLEARWATER, FL 33764

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PT (X) Change ( ) Addition  
Name: SIGAL, JOAN  
Address: 1927 SEVER DR  
City-St-Zip: CLEARWATER, FL 33764

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

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

Title: SEC (X) Change ( ) Addition  
Name: SHARP, DEB  
Address: 1952 ELMHURST DR  
City-St-Zip: CLEARWATER, FL 33765

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: DEB SHARP

SEC

04/30/2003

Electronic Signature of Signing Officer or Director

Date