2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 739733

Entity Name: CLEARWATER FREE CLINIC, INC.

Current Principal Place of Business:

1218 COURT STREET CLEARWATER, FL 33756

Current Mailing Address:

1218 COURT STREET

CLEARWATER, FL 33756 US

FEI Number: 59-1852871 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

SHAPIRO, JEAN R 1218 COURT STREET CLEARWATER, FL 33756 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: JEAN SHAPIRO 03/02/2023

Electronic Signature of Registered Agent

Officer/Director Detail:

Title DIRECTOR Title DIRECTOR

PHILLIPS, CRAIG Name Name BOUTON, STEPHEN 611 DRUID RD E Address Address 28619 N 45TH WAY

STE 707

City-State-Zip: CAVE CREEK AZ 85331 City-State-Zip: CLEARWATER FL 33756

Title DIRECTOR Title DIRECTOR

Name WIAND, BURTON Name PHILLIPS, DAVID

Address 125 CRESTWOOD LANE 616 PINELAND AVENUE Address

LARGO FL 33770 City-State-Zip: City-State-Zip: BELLEAIR FL 33756

Title DIRECTOR

Title DIRECTOR Name PERNO, JOSEPH DR.

WINTER, ELIZABETH Name Address 4505 W. MELROSE AVENUE

Address 1868 MONICA DRIVE

City-State-Zip: TAMPA FL 33629 City-State-Zip: CLEARWATER FL 33763

Title DIRECTOR

TREASURER Title Name HART, CHARLES E.

Name HAUG, CATHY 215 PONCE DE LEON BLVD Address

Address 2450 BURNICE DRIVE City-State-Zip: BELLEAIR FL 33756

City-State-Zip: CLEARWATER FL 33764

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I hereby 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 all other like empowered.

03/02/2023 SIGNATURE: JEAN SHAPIRO CEO

Electronic Signature of Signing Officer/Director Detail

Date

FILED Mar 02, 2023

Secretary of State

9528206915CC

Date

Officer/Director Detail Continued:

Title CHAIRMAN Title SECRETARY

NameLOVGREN, LUKENameLACINA, KIMBERLYAddress3174 SAN BERNADINO STREETAddress2208 HILL ROAD

City-State-Zip: CLEARWATER FL 33759 City-State-Zip: PALM HARBOR FL 34683

Title CEO Title DIRECTOR

NameSHAPIRO, JEANNameHENRY, MERIDETHAddress308 HICKORY LANEAddress644 POINSETTIA ROADCity-State-Zip:LARGO FL 33770City-State-Zip:BELLEAIR FL 33756

Title DIRECTOR Title DIRECTOR

Name LENZ, FEDERICO DR. Name MARKISON, LATRICE

Address 14001 KENSINGTON OAK PLACE Address 12041 KENT GROVE DRIVE

City-State-Zip: LARGO FL 33774 City-State-Zip: SPRING HILL FL 34610