SIGNATURE	E HAROLD WINNER		01/29/2019	
	Electronic Signature of Registered Agent			Date
Officer/Dire	ctor Detail :			
Title	DIRECTOR	Title	VP, DIRECTOR	
Name	ROLFES, RICHARD	Name	WINNER, HAROLD	
Address	486 24TH AVE N	Address	8142 NORWOOD RD	
City-State-Zip:	SAINT PETERSBURG FL 33704	City-State-Zip:	LARGO FL 33777	
Title	DIRECTOR	Title	DIRECTOR	
Name	SNELL, WILLIAM	Name	EKBERG, DONALD	
Address	492 HARBOR DR N	Address	1376 AMBASSADOR DRIVE	
City-State-Zip:	INDIAN ROCKS BEACH FL 33785	City-State-Zip:	CLEARWATER FL 33764	
Title	DIRECTOR	Title	TREASURER, DIRECTOR	
Name	COOPER, RANDY	Name	BARNETT, ROBERT	
Address	8729 BAY POINTE DRIVE	Address	14800 GULF BLVD. #202	
City-State-Zip:	TAMPA FL 33615	City-State-Zip:	MAREIRA BEACH FL 33708	
Title	DIRECTOR	Title	SECRETARY, DIRECTOR	
Name	LONG, PEGGY	Name	KRAEMER, ED	
Address	4989 WEST BREEZE CIRCLE	Address	11400 4TH ST. N #1404	

#### 2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

#### DOCUMENT# 751094

Entity Name: CLEARWATER UNITARIAN-UNIVERSALIST CHURCH FOUNDATION, INC.

## Current Principal Place of Business:

2470 NURSERY ROAD CLEARWATER, FL 33764

## **Current Mailing Address:**

2470 NURSERY ROAD CLEARWATER, FL 33764 US

# FEI Number: 59-2085249

## Name and Address of Current Registered Agent:

WINNER, HAROLD 8142 NORWOOD RD. LARGO, FL 33777 US Certificate of Status Desired: No

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.

		Continues on page 2		
City-State-Zip:	PALM HARBOR FL 34683	City-State-Zip:	ST. PETERSBURG FL 33716	
Address	4989 WEST BREEZE CIRCLE	Address	11400 4TH ST. N #1404	

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.

### SIGNATURE: ROBERT BARNETT

DIRECTOR AND TREASURER 01/29/2019

Electronic Signature of Signing Officer/Director Detail

# FILED Jan 29, 2019 Secretary of State 4283195720CC

#### **Officer/Director Detail Continued :**

Title	PRESIDENT, DIRECTOR	Title	DIRECTOR
Name	BOONE, SUE	Name	WATSON, ROBERTA
Address	1100 BELCHER RD. S #722	Address	55 MONTINIQUE AVE
City-State-Zip:	LARGO FL 33771	City-State-Zip:	TAMPA FL 33606
Title	DIRECTOR	Title	DIRECTOR
Name	MANNING, MARGIE	Name	BUESING, BOB
Address	4400 36TH AVE N	Address	161 BALTIC CIRCLE
City-State-Zip:	ST PETERSBURG FL 33713	City-State-Zip:	TAMPA FL 33606
Title	DIRECTOR	Title	DIRECTOR
Name	NORSWORTHY, BILL	Name	PACE, JOE
Address	502 LOCKIE STREET	Address	7323 SAWGRASS POINT DRIVE
City-State-Zip:	DUNEDIN FL 34698	City-State-Zip:	PINELLAS PARK FL 33782