

**2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N15000004646

**Entity Name:** CLEARWATER INDUSTRIAL CONDOMINIUM ASSOCIATION, INC.

**FILED**  
**Apr 04, 2025**  
**Secretary of State**  
**9704854836CC**

**Current Principal Place of Business:**

2100 PALMETTO ST., UNIT A  
CLEARWATER, FL 33765

**Current Mailing Address:**

2100 PALMETTO ST., UNIT A  
CLEARWATER, FL 33765 US

**FEI Number:** 47-4027762

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

KAISER, BRUCE A  
2100 PALMETTO ST  
CLEARWATER, FL 33765 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:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR, PRESIDENT,  
SECRETARY, TREASURER  
Name KAISER, BRUCE A  
Address 2100A PALMETTO ST  
City-State-Zip: CLEARWATER FL 33765

Title DIRECTOR  
Name KAISER, GINA B  
Address 2100A PALMETTO ST  
City-State-Zip: CLEARWATER FL 33765

Title DIRECTOR  
Name HODGES, BRYON  
Address 2100A PALMETTO ST  
City-State-Zip: CLEARWATER FL 33765

Title VP, DIRECTOR  
Name BACH, GARY  
Address 2100C PALMETTO STREET  
SUITE #3  
City-State-Zip: CLEARWATER FL 33765

Title DIRECTOR  
Name ALEXANDER, CHRIS  
Address BODY HEALTH  
745 MAIN STREET  
City-State-Zip: DUNEDIN FL 34698

*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: BRUCE KAISER**

**ACCOUNTING MANAGER 04/04/2025**

Electronic Signature of Signing Officer/Director Detail

Date