FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **395052** **(4)**

1. Corporation Name

CLEARWATER TROPHIES, INC.

Principal Place of Business	Mailing Address
2056 N.E. COACHMAN RD. CLEARWATER FL 34625	2056 N.E. COACHMAN RD. CLEARWATER FL 34625

3. Date Incorporated or Qualified: **02/01/1972**
3a. Date of Last Report: **04/07/1995**
4. FEI Number: **59-1381824** ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

CLAPP,PHYLLIS H.
106 S. COMET
CLEARWATER FL 34625

10. Name and Address of New Registered Agent

81 Name: Phil Clapp
82 Street Address (P.O. Box Number is Not Acceptable): 2593 Countryside Blvd 104
83
84 City: Clearwater **FL** 85 Zip Code: 34621

11. Pursuant to the provisions of Section(s) 607.0502 and 607.1506, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Philip Clapp President — Philip Clapp — 3-27-96
Signature of Registered Agent — Type or Print Name of Registered Agent — Date

12. OFFICERS AND DIRECTORS		
TITLE	PD	☐ DELETE
NAME	CLAPP, PHILIP R.	
STREET ADDRESS	2593 COUNTRYSIDE BV 104	
CITY-ST-ZIP	CLEARWATER FL	
TITLE	VD	☐ DELETE
NAME	DERMODY, LORRAINE	
STREET ADDRESS	209 MELODY LANE	
CITY-ST-ZIP	LARGO FL	
TITLE	SD	☐ DELETE
NAME	CLAPP, PHYLLIS H.	
STREET ADDRESS	106 S. COMET	
CITY-ST-ZIP	CLEARWATER FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12		
1.1 TITLE		☐ Change ☐ Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is true and accurate, that my 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or added above.

SIGNATURE: Phyllis Clapp PHYLLIS CLAPP — 3/26/96 — 813-442-0007
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone Number

CR2E034 (12/95)