

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 493737

(1)

1. Corporation Name

CLEMENT REALTY CORPORATION



Principal Place of Business

267 SUNSET DRIVE NORTH
ST PETERSBURG FL 33710

Mailing Address

267 SUNSET DRIVE NORTH
ST PETERSBURG FL 33710

2. Principal Place of Business

21 230 65th St N

Suite, Apt. #, etc.

22

City & State

23 St Petersburg FL

Zip

24 33710-7706

Country

25 Pinellas

2a. Mailing Address

26 230 65th St N

Suite, Apt. #, etc.

27

City & State

28 St Petersburg FL

Zip

29 33710-7706

Country

30 Pinellas

3. Date Incorporated or Qualified

01/15/1976

3a. Date of Last Report

04/21/1995

4. FET Number

05-9172546

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

g. Name and Address of Current Registered Agent

CLEMENT, JEAN L.

267 SUNSET DRIVE NORTH
ST PETERSBURG FL 33710

10. Name and Address of New Registered Agent

81 Name

Jeann L. Clement

82 Street Address (P.O. Box Number is Not Acceptable)

230 65th St North

83

84 City

St Petersburg

FL

85 Zip Code

33710-7706

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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: *Jeann L. Clement*

Signature typed or printed name of registered agent and their address

(If Not) Registered Agent Signature Required when registering

June 10, 1996

Date

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP ☐ DELETE

P
CLEMENT, JEAN L.
267 SUNSET DRIVE NORTH
ST PETERSBURG FL

TITLE NAME STREET ADDRESS CITY - ST - ZIP ☐ DELETE

D
CLEMENT, JEAN L.
267 SUNSET DRIVE NORTH
ST. PETERSBURG FL

TITLE NAME STREET ADDRESS CITY - ST - ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE NAME STREET ADDRESS CITY - ST - ZIP ☐ DELETE

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CITY - ST - ZIP

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CITY - ST - ZIP

TITLE NAME STREET ADDRESS CITY - ST - ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ☒ Change ☐ Addition

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

230 65th St N.
St Petersburg FL 33710-7706

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

230 65th St N.
St Petersburg FL 33710-7706

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and 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 on an attachment with an address.

SIGNATURE: *Jeann L. Clement*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

June 10, 1996 813-381-1415
Date Captain Phone

CR2E034 (12/95)