

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 718356

FILED
Feb 26, 2007
Secretary of State

Entity Name: CLEARVIEW TOWNHOUSES, INC.

Current Principal Place of Business:

2540 CLEAR PLACE
JACKSONVILLE, FL 32207

New Principal Place of Business:

Current Mailing Address:

2540 CLEAR PLACE
JACKSONVILLE, FL 32207

New Mailing Address:

FEI Number: 38-1956035

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WEAR, JOE T JR.
1301 10TH ST. E., STE. B
PALMETTO, FL 34221 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: SD () Delete
Name: HADZIOMEROVIC, JASMINKA
Address: 2654 CLEAR CIRCLE NORTH
City-St-Zip: JACKSONVILLE, FL 32207

Title: PD () Delete
Name: HAYES, LENA M
Address: 3752 CARMICHAEL AVENUE
City-St-Zip: JACKSONVILLE, FL 32207

Title: TD () Delete
Name: POWELL, ABRAHAM
Address: 2616 CLEAR CIRCLE SOUTH
City-St-Zip: JACKSONVILLE, FL 32207

Title: D () Delete
Name: JEETENDRA, SHUKLA
Address: 2626 CLEAR COURT
City-St-Zip: JACKSONVILLE, FL 32207

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JASMINKA HADZIOMEROVIC

SD

02/26/2007

Electronic Signature of Signing Officer or Director

Date