

# 2000. UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # H40038

1. Entity Name

CLEARWATER MATTRESS COMPANY, INC. ✓

**FILED**  
**Jul 20, 2000 8:00 am**  
**Secretary of State**

07-20-2000 90023 024 \*\*\*550.00

Principal Place of Business

1185 BASKIN DRIVE  
LARGO FL 33778  
US

Mailing Address

1185 BASKIN DRIVE  
LARGO FL 33778  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2480382

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

JONES, MEL  
1185 BASKINS DR.  
LARGO FL 33778

Name

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

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

**FILE NOW!!! FEE IS \$550.00**  
**After SEPTEMBER 13, 2000 Min. will be \$750.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE VP ☐ Delete  
NAME SIZEMORE, GARY D.  
STREET ADDRESS 9230 FAIRWEATHER DR  
CITY-ST-ZIP LARGO FL

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE PS ☐ Delete  
NAME JONES, MEL  
STREET ADDRESS 307 LAHACIENDA DR.  
CITY-ST-ZIP INDIAN ROCKS BCH FL

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE T ☒ Delete  
NAME RIDDLE, RON  
STREET ADDRESS 3927 HELENA NE  
CITY-ST-ZIP ST PETERSBURG FL 33703

T ☒ Change ☒ Addition  
NAME Ricardo Rosario-Jimenez  
STREET ADDRESS 1831 Anastasia Way S.  
CITY-ST-ZIP St Petersburg, FL 33712

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*[Signature]*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/17/00  
Date

727-479-1600  
Daytime Phone #

CR2E034 (1/00)