

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED
May 12 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # H93888 (6)
1. Corporation Name
CLARITY, INC.

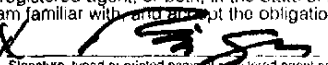


Principal Place of Business 643 BELTED KINGFISHER DRIVE, NORTH PALM HARBOR FL 34683	Mailing Address 643 BELTED KINGFISHER DRIVE, NORTH PALM HARBOR FL 34683-6258
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2. Principal Place of Business 21 27 REVOLUTIONARY RD. Suite, Apt. #, etc.		2a. Mailing Address 26 27 REVOLUTIONARY RD. Suite, Apt. #, etc.		3. Date Incorporated or Qualified 01/14/1986	3a. Date of Last Report 05/01/1996
22 City & State 23 SUDBURY, MA		27 City & State 28 SUDBURY, MA		4. FET Number 59-2634575	Applied For Not Applicable
24 01776 25 USA		29 01776 30 USA		5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
				8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

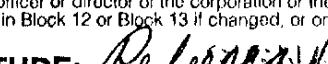
9. Name and Address of Current Registered Agent GONIWICH, REBECCA CHEFAN 643 BELTED KINGFISHER DRIVE, NORTH PALM HARBOR FL 34683		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code	
		RICK SNYDER 643 BELTED KINGFISHER DRIVE NORTH PALM HARBOR FL 34683	

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  CIA DATE 4/29/97

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GONIWICH, REBECCA C. 643 BELTED KINGFISHER DR PALM HARBOR FL	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	PD GONIWICH, REBECCA C. 27 REVOLUTIONARY RD. SUDBURY, MA 01776
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V GONIWICH, ALAN C. 643 BELTED KINGFISHER DR PALM HARBOR FL	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	V GONIWICH, ALAN C. 27 REVOLUTIONARY RD. SUDBURY, MA 01776
TITLE NAME STREET ADDRESS CITY-ST-ZIP		3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	

14. I do 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 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  REBECCA C. GONIWICH
PRESIDENT 4/29/97 608-443-4030

CR2E034 (9/96)