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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K00548

1. Corporation Name

Principal Place of Business

CLEAR CREEK DEVELOPMENT CORP.

/ 1///Cipalitina		•		
% JAMES E. VANDER MEY 9501 N.W. HIGHWAY 326 9501 N.W. HIGHWAY 926				
OCALA FL 344	87	OG ALA-FL-344 82		DO NOT WRITE IN THIS SPACE
US		H 3		3. Date Incorporated or Qualifed
				11/03/1987
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number Applied For
21 Yo James E. Vander Mey 26 Yo James E			. Vander M	Cy 59-2856682 Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc. 27 S/01 SE			1/th Ave	5. Certifcate of Status Desired Sequired Fee Required
City & Stat		City & State		6. Election Campaign Financing S5.00 May Be
23 OC		28 Ocala F	^{>} ∟	Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year Intangible
344	80 25 US	29 34480 30	5 US	Personal Property Tax. ☐ Yes ☐ No
	9. Name and Address of Current		1	10. Name and Address of New Registered Agent
81 Name				
VANDER MEY, JAMES E.				
	N.W. HIGHWAY 326		82 Street /	Address (P.O. Box Number is Not Acceptable)
OCALA FL 34482			83	1 SE II TH AVE
OGNER I E OTTOE				
			84 City	S ALM EI 85 Zip Code
				TE 34480
office or r	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligation	f Florida. Such change was auth	norized by the corpo	corporation submits this statement for the purpose of changing its registered oration's board of directors. I hereby accept the appointment as registered
agent. i a	m jamiliai with, and accept the obligation	JIS OI, Section Bor. 0303, I foliate	a Statutes.	
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable (NOTE: Re	egistered Agent signature re	adulted when reinstating) DATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
	VANDER MEY, JAMES E.			- · -
NAME			1.2 NAME	SIDI SE 11TH AVE
STREET ADDRESS	9501 N.W. HWY 326	,	1.3 STREET ADDRESS	
CITY-ST-ZIP	OCALA FL		1.4 CITY-ST-ZIP	OCALA FL 34480
TITLE	T	☐ DELETE	2.1 TITLE	☐Change ☐ Addition
NAME	vander mey, barbara o.		2.2 NAME	
STREET ADDRESS	9 501 N.W. HWY. 328		2.3 STREET ADDRESS	5101 SE 11th AVE
CITY-ST-ZIP	OCALA FL		2.4 CITY-ST-ZIP	OCALA, FL 34480
TITLE	V	☐ DELETE	3.1 TITLE	☐ Change
NAME	MAYFIELD, JERRY W.		3.2 NAME	·
	9501 N.W. HWY: 326		3.3 STREET ADDRESS	17283 SW 54Th St.
STREET ADDRESS	GGALA FL			OKlawaha, FL
CITY-ST-ZIP	OOMLA FL	☐ DELETE	3.4. CITY-ST-ZIP 4.1 TITLE	Change Addition
TITLE		C SELETE		
NAME			4 2 NAME	·
STREET ADDRESS			4.3 STREET ADDRESS	

14. 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 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, with all other like empowered.

4.4 CITY-ST-ZIP

5.3 STREET ADDRESS

63 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

DELETE

SIGNATURE:

CITY-ST-ZIP

CITY-ST-ZIP

STREET ADORESS

STREET ADDRESS

TITLE

NAME

TITLE

NAME

GIVATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICE OF

James E. Vander Mey

Jan 9,1999

Feb 23, 1999 8:00 am

Secretary of State

02-23-1999 90004 027 ***150.00

352/86/-4581 Daytime Phone #

☐ Change

[] Change

Addition

Addition

R2E034 (11/98)