

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jul 09, 2004 8:00 am**  
**Secretary of State**

07-09-2004 90009 017 \*\*\*150.00

**DOCUMENT # L02780**

1. Entity Name  
**THE CLAUSSEN COMPANY**



Principal Place of Business  
**6025 CARLTON LAKES BLVD  
NAPLES, FL 34110-1387 US**

Mailing Address  
**6025 CARLTON LAKES BLVD  
NAPLES, FL 34110-1387 US**

**54061110**



2. Principal Place of Business

3. Mailing Address

**6704 Lone Oak Blvd**

07062004

Chg-P

CR2E034 (10/03)

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

**NAPLES FL**

4. FEI Number

**65-0133944**

Applied For

Not Applicable

Zip

Country

Zip

Country

**34109**

**USA**

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

**STERLING, JOHN  
2405 PIPER BLVD  
MAPLES, FL 34110**

Name

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

**6704 Lone Oak Blvd**

City

**NAPLES**

FL

Zip Code

**34109**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

*[Signature]*

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**7/6/04**

**FILE NOW!!! (FEE IS \$150.00  
Due by September 8, 2004)**

9. Election Campaign Financing  
Trust Fund Contribution.

☐

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

In accordance with s. 607.193(2)(b), F.S., the  
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**PTS  
CLAUSSEN, ROBERT G  
4910 DEERFIELD WAY  
NAPLES, FL 34110**

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**V  
CLAUSSEN, CHRISTOPHER  
2074 SEVILLA WAY  
NAPLES, FL 34109**

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Delete

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CITY-ST-ZIP

☐ Change ☐ Addition

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☐ Change ☐ Addition

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TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*[Signature]* **Robert G. Claussen**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**7/6/04**

Date

**239-546 9007**

Daytime Phone #