## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L04000078153

City-St-Zip:

Entity Name: CLEARVIEWENTERPRISES, LLC

FILED Apr 30, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 1809 E BROADWAY ST SUITE 220 OVIEDO, FL 32765 **Current Mailing Address: New Mailing Address:** 1809 E BROADWAY ST SUITE 220 OVIEDO, FL 32765 FEI Number: 20-2148359 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: COLAMARINO, CLARE M 878 BENCHWOOD DR WINTER SPRINGS, FL 32708 US 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 MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: Title: () Delete (X) Change ( ) Addition SCHULTZ, LOIS J Name: SCHULTZ, LOIS J Name: Address: 1809 E BROADWAY ST, SUITE 220 Address: 1809 E BROADWAY ST, SUITE 220 City-St-Zip: OVIEDO, FL 32765 City-St-Zip: OVIEDO, FL 32765 Title: MGRM () Delete Title: () Change () Addition Name: SCHULTZ, ROYAL Name: Address: 1809 E BROADWAY ST. SUITE 220 Address: City-St-Zip: OVIEDO, FL 32765 City-St-Zip: Title: () Delete Title: MGRM ( ) Change (X) Addition Name: GEORGE, CARRIE Name: 1809 E BROADWAY ST, SUITE 220 Address: Address:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

City-St-Zip:

OVIEDO, FL 32765

SIGNATURE: LOIS J. SCHULTZ MGRM 04/30/2008