

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED
Aug 29, 2006 8:00 am
Secretary of State

08-29-2006 90074 020 ****55.00



DOCUMENT # L05060015681

1. Entity Name

CLEARVIEW CONSTRUCTION, LLC

Principal Place of Business

9003 61ST AVENUE EAST
 BRADENTON FL 34203

Mailing Address

9003 61ST AVENUE EAST
 BRADENTON FL 34203



2. Principal Place of Business

3281 81st Court East

3. Mailing Address

3281 81st Court East

Suite, Apt. #, etc.

Suite, Apt. #, etc.

2nd MOORE

CR2E083 (4/06)

City & State

Bradenton FL

City & State

Bradenton FL

4. FEI Number

05-0617471

Applied For

Not Applicable

Zip

34211

Country

U.S.

Zip

34211

Country

U.S.

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

HARDING, JOHN W II
 9003 61ST AVENUE EAST
 BRADENTON FL 34203

7. Name and Address of New Registered Agent

Name

John W. Harding

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

11011 2nd Ave. E

City

Bradenton FL

FL

Zip Code

34212

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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

[Handwritten Signature]

8/24/06

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Florida Department of State
Due By September 6, 2006

9. MANAGING MEMBERS / MANAGERS

TITLE	MGRM	<input type="checkbox"/> Delete
NAME	HARDING, JOHN W III	
STREET ADDRESS	9003 61ST AVENUE EAST	
CITY - ST - ZIP	BRADENTON FL 34203	
TITLE	MGRM	<input type="checkbox"/> Delete
NAME	HARDING, JOHN W II	
STREET ADDRESS	9003 61ST AVENUE EAST	
CITY - ST - ZIP	BRADENTON FL 34203	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

10. ADDITIONS / CHANGES

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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.

SIGNATURE:

[Handwritten Signature]

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

8/24/06

Date

Daytime Phone #