

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000006244

FILED
May 01, 2006
Secretary of State

Entity Name: CLEAR OPTIONS, INC.

Current Principal Place of Business:

16673 MELLE LN
JUPITER, FL 33478

New Principal Place of Business:

Current Mailing Address:

10152 WEST INDIAN LN
PO BOX 113
JUPITER, FL 33478

New Mailing Address:

FEI Number: 65-1133517 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

MCLEOD, KEVIN
16673 MELLE LN
JUPITER, FL 33478 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

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MCLEOD, KEVIN
Address: 16673 MELLE LN
City-St-Zip: JUPITER, FL 33478

Title: D () Delete
Name: HANDY, QUINCY V
Address: 16673 MELLE LN
City-St-Zip: JUPITER, FL 33478

Title: D () Delete
Name: WOODS, ROBERT
Address: 1962 WISTERIA
City-St-Zip: WELLINGTON, FL 33414

Title: D () Delete
Name: ARNETT, TYRON
Address: 916 SW AVE H
City-St-Zip: BELLE GLADE, FL 33430

Title: D () Delete
Name: EICHELROTH, WILLIAM
Address: 14100 US 1
City-St-Zip: JUNO BEACH, FL 33408

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KEVIN MCLEOD

PRES

05/01/2006

Electronic Signature of Signing Officer or Director

Date