


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 15, 2006 8:00 am
Secretary of State

03-15-2006 90110 040 ****61.25

DOCUMENT # N35986

1. Entity Name
CLEARVIEW LAKE ESTATES HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business
**C/O PAMELA DONOVAN, TREASURER
 1916 SKY DRIVE
 CLEARWATER, FL 33755**

Mailing Address
**C/O PAMELA DONOVAN, TREASURER
 1916 SKY DRIVE
 CLEARWATER, FL 33755**

2. Principal Place of Business
C/O JULIE LEVESQUE

3. Mailing Address
C/O JULIE LEVESQUE


Suite, Apt. #, etc.
1706 STARLIGHT DR

City & State
CLEARWATER FL

Zip
33755

Country
US

50002735



01272006 Chg-NP CR2E037 (11/05)

4. FEI Number
59-2991539

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**DONOVAN, PAMELA
 1916 SKY DRIVE
 CLEARWATER, FL 33755**


7. Name and Address of New Registered Agent

Name **JULIE LEVESQUE**

Street Address (P.O. Box Number is Not Acceptable)
1706 STARLIGHT DR

City **CLEARWATER FL** Zip Code **33755**

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  DATE **2/12/06**

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

Filing Fees **\$61.25** Due by **May 1, 2006**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

Make check payable to **Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP MILLER, BRUCE 1952 CLEARVIEW LAKE DRIVE CLEARWATER, FL 33755	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT DONOVAN, PAM 1916 SKY DR CLEARWATER, FL 33755	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV JACKSON, JOANNE 1900 CLEARVIEW LAKE DR CLEARWATER, FL 33755	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS MILLER, ANN 1960 CLEARVIEW LAKE DRIVE CLEARWATER, FL 33755	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LEVESQUE, DAN 1706 STARLIGHT DRIVE CLEARWATER, FL 33755	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D POTTER, LAURA 1707 ALGONQUIN DRIVE CLEARWATER, FL 33755	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP ELLEN HESS 1724 SUNSET PT. RD CLEARWATER FL 33755	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT JULIE LEVESQUE 1706 STARLIGHT DR CLEARWATER FL 33755	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS JOE MORGAN 1915 STARDUST DR CLEARWATER FL 33755	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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 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 617, 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:  Date _____ Daytime Phone # _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ATTACHMENT

50002735 -

CLEARVIEW LAKE ESTATES HOMEOWNERS ASSOCIATION

Clearwater, Florida 33755

#N35986

1706 Starlight Dr
Clearwater, FL 33755-1630
March 12, 2006

FLORIDA DEPARTMENT OF STATE
Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

RE: Clearview Lake Estates Homeowners Association, Inc
FEI Number: 59-2991539
Document Number: N35986

Additional Directors:

D
Derek Roberts
1727 Algonquin Dr
Clearwater, FL 33755

D
Pam Donovan
1916 Sky Dr
Clearwater, FL 33755

D
Genny Kee
1959 Sky Dr.
Clearwater, FL 33755

D
Lee Hooper
1736 Algonquin Dr
Clearwater, FL 33755

D
Marcia Mentor
1930 Sunset Pt. Rd.
Clearwater, FL 33755

D
Merle Brann
1718 Sunset Pt. Rd
Clearwater, FL 33755

Regards,


Julie Levesque, Registered Agent

Pd
Enclosure (Check for \$61.25 payable to Department of State)