

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

3/7

FILED
Jul 29, 2003 8:00 am
Secretary of State

03-07-2003 90134 032 ****61.25

DOCUMENT # N35986
1. Entity Name
CLEARVIEW LAKE ESTATES HOMEOWNERS ASSOCIATION, I NC.



Principal Place of Business Mailing Address
C/O PAT MOORE, DIRECTOR C/O PAT MOORE, DIRECTOR
1773 SUNRISE PLACE 1773 SUNRISE PLACE
CLEARWATER FL 33755 CLEARWATER FL 33755

55052655



2. Principal Place of Business 3. Mailing Address
Suite, Apt. #, etc. Suite, Apt. #, etc.
City & State City & State

CHECK HERE IF MAKING CHANGES

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 7. Name and Address of New Registered Agent

MOORE, PATSY A
1773 SUNRISE PLACE
CLEARWATER FL 33755

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW: FEE IS \$61.25 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		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP JACKSON, JOANNE 1900 CLEARVIEW LAKE DR CLEARWATER FL 33755 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP KERR, SONDR 1706 SUNSET POINT RD CLEARWATER, FL 33755 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT DONOVAN, PAM 1918 SKY DR CLEARWATER FL 33755 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV MERCER, BOB 1769 STARLIGHT 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 checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS HUNT, BETTY 1750 STARDUST DR CLEARWATER FL 33755 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS HUDSON, LAURA 1924 STARDUST DR CLEARWATER, FL 33755 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MILLER, BRUCE 1952 CLEARVIEW LAKE DR CLEARWATER FL 33755 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ROBERTSON, NORMA 1923 SKY DR CLEARWATER FL 33755 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JACKSON, CAROL 1749 SUNRISE PLACE CLEARWATER, FL 33755 <input checked="" type="checkbox"/> Change <input type="checkbox"/> 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 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: Patsy A. Moore **PATSY A. "PAT" MOORE** 02-14-03(127)447-178
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (10/02)

Attachments

N35986
55052655

CLEARVIEW LAKE ESTATES HOMEOWNERS ASSOCIATION, INC.

Clearwater, Florida 33755

1773 Sunrise Place
Clearwater, FL 33755-1650
February 13, 2003

FLORIDA DEPARTMENT OF STATE
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

Gentlemen:

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

Additional Directors:

D
MOORE, PAT
1773 SUNRISE PLACE
CLEARWATER, FL 33755

D
MILLER, JOHN
1960 CLEARVIEW LAKE DR
CLEARWATER, FL 33755

D
POTTER, LAURA
1707 ALGONQUIN DR
CLEARWATER, FL 33755

D
LEVESQUE, DAN
1706 STARLIGHT DR
CLEARWATER, FL 33755

D
CASON, KAREN
1711 STARLIGHT DR
CLEARWATER, FL 33755

Very truly yours,

Pat Moore

Pat Moore, Registered Agent

pm
enclosure (Check for \$61.25 payable to Department of State
cc: file