

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2008 8:00 am
Secretary of State

05-02-2008 90173 015 ***150.00

DOCUMENT # P04000055380

1. Entity Name
CLEARWATER REAL ESTATE COMPANY, INC.



Principal Place of Business
**2325 ULMERTON RD STE 20
CLEARWATER, FL 33762**

Mailing Address
**2325 ULMERTON RD STE 20
CLEARWATER, FL 33762**

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

03262008

Chg-P

CR2E034 (12/06)

4. FEI Number

14-1905436

Applied For

Not Applicable

5. Certificate of Status Desired - ☐ -

**\$8.75 Additional -
Fee Required**

6. Name and Address of Current Registered Agent

**MORRIS, GREGORY D
2325 ULMERTON RD, # 20
CLEARWATER, FL 33762**

7. Name and Address of New Registered Agent

Name **CFRA, LLC**

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

4221 W Boy Scout Blvd, 10th Floor

City **Tampa**

FL

Zip Code **33607**

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

CFRA, LLC

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4/29/08

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
NAME **BULLARD, FRED B JR.**
STREET ADDRESS **2325 ULMERTON RD STE 20**
CITY-ST-ZIP **CLEARWATER, FL 33762**

TITLE **V** ☐ Delete
NAME **MORRIS, GREGORY D**
STREET ADDRESS **2325 ULMERTON RD, # 20**
CITY-ST-ZIP **CLEARWATER, FL 33762**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 607, 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:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/29/08

Date

727-576-5424

Daytime Phone #