



# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

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**FILED**  
**Jun 05, 2006 8:00 am**  
**Secretary of State**

04-27-2006 90208 030 \*\*\*150.00

<b>DOCUMENT # P05000109055</b> 1. Entity Name <b>CLEARWATER RESERVE PHASE II, INC.</b>					
Principal Place of Business <b>720 ALMOND STREET CLERMONT, FL 34711</b>			Mailing Address <b>720 ALMOND STREET CLERMONT, FL 34711</b>		
2. Principal Place of Business  Suite, Apt. #, etc.  City & State  Zip      Country		3. Mailing Address  Suite, Apt. #, etc.  City & State  Zip      Country		<div style="font-size: 24pt; font-weight: bold; margin-bottom: 10px;">66017847</div>  <div style="display: flex; justify-content: space-between; font-size: 10pt;"> <span>04192006    Chg-P    CR2E034 (11/05)</span> </div> <div style="display: flex; justify-content: space-between;"> <div style="width: 60%;">         4. FEI Number  <div style="border: 1px solid black; padding: 2px; font-family: monospace; font-size: 12pt;">20-4975197</div> </div> <div style="width: 35%; border: 1px solid black; padding: 2px;">         Applied For  <input type="checkbox"/> Not Applicable       </div> </div> <div style="display: flex; justify-content: space-between;"> <div style="width: 60%;">         5. Certificate of Status Desired    <input type="checkbox"/> </div> <div style="width: 35%; border: 1px solid black; padding: 2px;"> <b>\$8.75</b> Additional Fee Required       </div> </div>	
6. Name and Address of Current Registered Agent  <b>LANGLEY, RICHARD H 720 ALMOND ST. CLERMONT, FL 34711</b>				7. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ City _____ <b>FL</b> 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 re-registering)      DATE _____					
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2006 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00</b> May Be Added to Fees	
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P, D LANGLEY, RANDALL B 720 ALMOND ST. CLERMONT, FL 34711	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete			
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete			
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 or other like empowered.					
<b>SIGNATURE:</b> _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<div style="display: flex; justify-content: space-between;"> <div> <b>4/24/06</b>  <small>Date</small> </div> <div> <b>407-6548675</b>  <small>Daytime Phone #</small> </div> </div>		