# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000151347

Entity Name: CLEARVIEW GALLERIES OF TAMPA, INC.

FILED Sep 06, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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4521 PGA BLVD STE 287 11345 LEGACY AVENUE

PALM BEACH GARDENS, FL 33418 BLDG. D-110

PALM BEACH GARDENS, FL 33410

Current Mailing Address: New Mailing Address:

4521 PGA BLVD STE 287 11345 LEGACY AVENUE

PALM BEACH GARDENS, FL 33418 BLDG. D-110

PALM BEACH GARDENS, FL 33410

FEI Number: 20-8096366 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

## Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MATHISON, STEPHEN S
5606 PGA BLVD
PALM BEACH GARDENS, FL 33418 US

MATHISON, STEPHEN S
5606 PGA BOULEVARD
SUITE 211

PALM BEACH GARDENS, FL 33418 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: 09/06/2007

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ( ).

### **OFFICERS AND DIRECTORS:**

### ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: D (X) Change () Addition

Name: ROSS, RYAN Name: ROSS, RYAN

Address: 4521 PGA BLVD STE 287 Address: 11345 LEGACY AVENUE, BLDG. D-110

City-St-Zip: PALM BEACH GARDENS, FL 33418 City-St-Zip: PALM BEACH GARDENS, FL 33410

Name: ROSS, DARA Name: ROSS, DARA

 Address:
 4521 PGA BLVD STE 287
 Address:
 11345 LEGACY AVENUE, BLDG. D-110

 City-St-Zip:
 PALM BEACH GARDENS, FL 33418
 City-St-Zip:
 PALM BEACH GARDENS, FL 33410

Title: D ( ) Delete Title: D (X) Change ( ) Addition

Name: MUENZER, DAVID Name: MUENZER, DAVID

Address: 4521 PGA BLVD STE 287 Address: 11345 LEGACY AVENUE, BLDG. D-110 City-St-Zip: PALM BEACH GARDENS, FL 33418 City-St-Zip: PALM BEACH GARDENS, FL 33410

I hereby certify that the information supplied with this filing does not qualify 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAVID MUENZER D 09/06/2007