

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P15941 (8)

1. Corporation Name

CLEARWATER ACQUISITION CORP.



Principal Place of Business

Mailing Address

CORPORATION TRUST CENTER  
1209 ORANGE ST.  
WILMINGTON DE 19801

CORPORATION TRUST CENTER  
1209 ORANGE ST.  
WILMINGTON DE 19801

2. Principal Place of Business

2a. Mailing Address

21 6210 Commercial Way

26 2542 Williams Blvd

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

23 City & State  
Brooksville, FL

28 City & State  
KENNER LA

24 Zip Country

29 Zip Country  
70062

25

30

3. Date Incorporated or Qualified

09/11/1987

3a. Date of Last Report

05/01/1995

4. FEI Number

72-1101030

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

☐ \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes

☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION FL 33324

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE

NAME LASSEN, SIDNEY W.  
STREET ADDRESS 2542 WILLIAMS BLVD.  
CITY-ST-ZIP KENNER LA

TITLE V ☒ DELETE

NAME DAVIDSON, THOMAS S.  
STREET ADDRESS 2542 WILLIAMS BLVD.  
CITY-ST-ZIP KENNER LA

TITLE ST ☒ DELETE

NAME GILLULY, JOHN J., JR.  
STREET ADDRESS 2542 WILLIAMS BLVD.  
CITY-ST-ZIP KENNER LA

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☒ Addition

2.2 NAME VP THOMAS A. MASILLA JR

2.3 STREET ADDRESS 2542 WILLIAMS BLVD

2.4 CITY-ST-ZIP KENNER LA 70062

3.1 TITLE ☐ Change ☒ Addition

3.2 NAME ST DAVID A. D'FLYNN JR

3.3 STREET ADDRESS 2542 WILLIAMS BLVD

3.4 CITY-ST-ZIP KENNER LA 70062

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (12/95)