

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 22, 2008 08:00 AM
Secretary of State

DOCUMENT # P36666

1. Entity Name

LOGAN CLEARWATER REALTY CORP.



Principal Place of Business

11540 HWY 92 EAST
SEFFNER, FL 33584 US

Mailing Address

11540 HWY 92 EAST
SEFFNER, FL 33584 US



03312008 No Chg-P CR2E034 (11/05)

4. FEI Number

59-3053571

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

BEYER, DAVID A
C/O RUDNICK & WOLFE
101 E. KENNEDY BLVD., SUITE 2000
TAMPA, FL 33602-5133

**DO NOT WRITE
IN THIS SPACE**

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

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

(NOTE: Registered Agent signature required when reinstating)

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**

U000000913753
05/08/08-80028-020 150.00

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	SEAMAN, JULIE
STREET ADDRESS	11540 HWY 92 EAST
CITY-ST-ZIP	SEFFNER, FL
TITLE	VD
NAME	FINKEL, JEFFREY
STREET ADDRESS	11540 HWY 92 EAST
CITY-ST-ZIP	SEFFNER, FL
TITLE	S
NAME	STEIN, LEWIS
STREET ADDRESS	11540 HWY 92 EAST
CITY-ST-ZIP	SEFFNER, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

David A. Beyer
David A. Beyer

4/18/08 8136235900