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**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## **FILED** Feb 20, 1999 8:00 am Secretary of State 02-20-1999 90144 032 \*\*\*150.00

## DOCUMENT # DO2000057160

<ol> <li>Corporation I</li> </ol>	NAME  STREET OF CLEARWA	ater, inc	C.									
	of Business	Mai	iling Address					<b>A</b> l 19 <b>0 (0</b> :000 (1))) dasin da	illi Astii Asia	i Ailii (846) (1918 p.)		
Principal Place			2471 MCMULLEN BOOTH RD.							•		
471 MCMULLEN LEARWATER FL	8001H HU. 34621		ARWATER FL 34621					DO NOT WRI	ITE IN THI	S SPACE		
CLAMINICITY							3 Date Incor	porated or Qualifed				
							08/04/19					
			Mailing Address	·			4. FEI Numb		<del></del> ,		ied For	
. Principal Place of Business		<del></del>	2a. Mailing Address 26 Suite, Apt. #, etc. 27				59-3207508			Not Applicable		
1		20					5. Certifcate of Status Desired	of Status Desired			\$8.75 Additional Fee Required	
Suite, Apt. #, etc.		27										
City & State			City & State					ampaign Financing		\$5.00 N Added to		
3	•	28						Contribution			1.602	
Zip	Country		Zip	$\overline{}$	ountry			oration owes the cui	rrent year i	mangible ∐Yes [	⊒No	
4	25	29		30			Personal	Property Tax. d Address of New	Registere			
	9. Name and Address of Cu	ırrent Regis	tered Agent		81	Name	10. Haitie att	a radiood o				
	AN MACH A											
	an, mark a Cleveland Street				82	Street Ad	dress (P.O. Box N	umber is Not Accep	itable)			
					83							
	E 400									es Zin C	ode	
CLEARWATER FL 34615					84	City			F	FL 85 Zip Code		
					- 1 - 1							
	to the provisions of Sections 607	7.0502 and 6	607.1508, Florida Sta	itutes, the	above	-named co	proporation submits	this statement for the	e purpose	of changing its to pointment as reg	egisterea istered	
11. Pursuant office or re	to the provisions of Sections 607 egistered agent, or both, in the S	7.0502 and 6	507.1508, Florida Sta da. Such change was 5 Section 607.0505	itutes, the s authoriz Florida Si	above zed by f tatutes.	-named co	orporation submits ation's board of dire	this statement for the ectors. I hereby acc	e purpose ept the app	of changing its op pointment as reg	egistered istered	
11. Pursuant office or reagent. I a	to the provisions of Sections 607 egistered agent, or both, in the S m familiar with, and accept the o	7.0502 and 6 State of Florion State of Storions of	f, Section 607.0505, 1	Florida St	tatutes.	•		this statement for the ectors. I hereby acc		of changing its i	egistered	
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indicated on this annual report or supplemental annual report is true and accurate and that my signature shall ordicer or director of the corporation or the receiver or trustee empowered to execute this report as required by Block 12 or Block 13 if changed, or on an attachment with any address, with all other like empowered.

SIGNATURE: