## **FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00**

**CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DÖCUMENT # P94000047119 (0)

Country

25

CLEARWATER GAMING, INC. Principal Place of Business

Mailing Address

2a. Mailing Address

City & State

Suite, Apt. #, etc.

26

29

Name and Address of Current Registered Agent

2059 RANGE RD. **CLEARWATER FL 34625** 

Sulte, Apt. #, etc.

City & State

21

22

23

24

Zip

2. Principal Place of Business

2059 RANGE RD. CLEARWATER FL 34625-2124

**FILED** Apr 24 1997 8:00am Secretary of State

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Yes No

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

10. Name and Address of New Registered Agent

4-14-97

3a. Date of Last Report 03/19/1996

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

Not Applicable

3. Date incorporated or Qualified

5. Certificate of Status Desired

6. Election Campaign Financing

Trust Fund Contribution

06/21/1994

59-3250338

Florida Statutes

4. FEI Number

11. Pursuant to the provisions of Soctions 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing 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 agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  SIGNATURE  SIGNATURE  SIGNATURE  SIGNATURE  OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  14. ONTE Registered Agent's gnature required when reinstalling)  DAIL  Chan  WITT, GLENN D  12 NAME  WITT, GLENN D  12 NAME  13 STREET ADDRESS  CITY-S1-ZIP  TITLE  DELETE  21 TITLE  DELETE  22 NAME  22 NAME  23 STREET ADDRESS  CITY-S1-ZIP  DELETE  33 TITLE  34 CITY-S1-ZIP  Chan  NAME  STREET ADDRESS  CITY-S1-ZIP  AMAGE  32 NAME  32 NAME  32 NAME  STREET ADDRESS  CITY-S1-ZIP  AMAGE  33 STREET ADDRESS  CITY-S1-ZIP  AMAGE  34 CITY-S1-ZIP  34 CITY-S1-ZIP	Code its registered s registered
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14. 1 do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify 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 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 n appears in Block 12 or Block 13 if changed, or on an attachment with an address.	nder oath; ti

Country

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