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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000068974 (2)

CLEARSHIELD OF THE TREASURE COAST, INC.

FILED May 11 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						
1019 SE HOLBROOK COURT 1019 SE HOLBROOK COURT			OURT			
BUILDING B UNIT 3 PORT ST. LUCIE FL 34952			BUILDING C. UNIT #4 PORT ST. LUCIE FL 34952		DO NOT WRITE IN THIS SPACE	
US		US			3. Date Incorporated or Qualified	
					09/16/1994	
2. Principal F	Place of Business	2a. Mailing Address	2a. Mailing Address		4. FEI Number Applied For	
21		26			28-1303731 Not Applicabl	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			S9 75 Additional	
22		27			5. Certificate of Status Desired Fee Required	
City & State		City & State			6. Election Campaign Financing \$5.00 May Be	
23	28				Trust Fund Contribution Added to Fees	
Zip	Country	Zip	Countr	/	8. This corporation owes or has paid the current year Intaggible	
24	25	29	30		Personal Property Tax due June 30. 🔲 Yes 📝 No	
	9, Name and Address of Curre	ent Registered Agent		T ::.	10. Name and Address of New Registered Agent	
REILLY, JACK 81 Name						
1019 SE HOLBROOK COURT			82	82 Street Address (P.O. Box Number is Not Acceptable)		
	DG B UNIT 3		ļ <u></u>			
PC	PRT \$ T. LUCIE FL 34952		63			
			84	City	85 Zip Code	
				L		
office or	registered agent, or both, in the Stat	te of Florida. Such change was	authorized b	v the corpo	corporation submits this statement for the purpose of changing its registered location'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					Distr.	
12.	Signature, typed or pricted name of registered a	9214 AND DIRECTORS	13.	ent signature r	required whon reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VPS	DELETE	1.1 TITLE		DA & Change Additio	
NAME	REILLY, JACK P		1.2 NAME		Jan P. Reilly	
STREET ADORESS	2041 GRIFFIN AVENUE			I ADDRESS	2001 GIFFEN AVE	
CITY-ST-ZIP	PORT ST. LUCIE FL		1.4 CITY-		JACIC P. Reilly 2091 GIFFEN AVE PORT ST LUCIE FLA. 34952	
TITLE	P	DELETE	2.1 TITLE	21 211	☐ Change ☐ Additio	
NAME	OORWARD, BERT	•	2.2 NAME			
STREET ADDRESS	1301 RUSHING LANE		2.3 STREE	F ADDRESS		
CITY-ST-ZIP	PORT ST. LUCIE FL		2. 4 CITY-			
TITLE		☐ DELETE 3.11			Change Additio	
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREE	T ADDRESS		
CITY-ST-ZIP			3.4 CITY-	ST-ZIP	<u> </u>	
TITLE	-	☐ DELETE	4.1 TITLE		Change Additio	
NAME		,	4. 2 NAME	1		
STREET ADDRESS			4.3 STREE	T ADDRESS		
CITY-ST-ZIP			4.4 CITY - 1	ST- ZIP		
TITLE		L DELETE	5.1 TITLE		☐ Change ☐ Additio	
NAME			5.2 NAME	1		
STREET ADDRESS			5.3 STREE	I ADDRESS		
CITY-ST-ZIP			5.4 CITY-	ST-ZIP		
TITLE		☐ DELETÉ	6.1 TITLE		Change Additio	
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREE	ADDRESS		
CITY-ST-ZIP	La contraction of the contractio	and the state of the same of the same of the	6.4 CITY-1		d in Cooling (40 07/9V). Florido Statutos I fuelhas apulf, that the 1-7	
Indicated	on this annual report or supplemen	ital annual report is true and ac	ccurate and th	at my sign	d in Section 119.07(3)(i). Florida Statutes. I further certify that the information nature shall have the same legal effect as if made under oath; that I am an	
officer or director of the corporation of 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.						
block to be block to a bringlet of the artifaction						