## 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 # P95000060874 (1)

**FILED** 

May 08 1998 8:00am

Secretary of State

CLEAR CHOICE HURRICANE PROTECTION, INC.				TATERICAL IND TRIBE AREA ARTICLARIA DE STATE DE
Principal Plac	e of Business	Mailing Address		r and the first first billing and serie solic solid billings to the serie solid
2920 N.W. 2ND \$TREET		2920 N.W. 2ND STREET		
SUITE 9		SUITE 9		DO NOT WRITE IN THIS SPACE
BOCA RATON FL 33431		BOCA RATON FL 33431		3. Date Incorporated or Qualified
				08/07/1995
2. Principal Place of Business / 2a. Mailir		2a. Mailing Address		4. FEI Number Applied For
21 1304 Gwenzeu Ave		26 Same		65-0602022 Not Applicable
Suite, Apt, #, etc.		Suite, Apt #, etc.		5. Certificate of Status Desired \$8.75 Additional
22 ++		27		Fee Required
23 Delron Beach		City & State		6. Election Campaign Financing \$5.00 May Be
23 Delray Blach		Zin Coulding		Trust Fund Contribution L Added to Fees
Zip 33444 25 Falm Bah		Zip	Country	8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. Yes No
24 307	9. Name and Address of Current	Pegistered Agent	<u> </u>	Personal Property Tax due June 30. Yes No  10. Name and Address of New Registered Agent
				10. Halle and Adaloge of Heat Hegistoles Math.
HEIDAND, SUSAN			i I	
BOCA RATON FL 33496			82 Special	dress (P.O. Box Number is Net Acgeptable)
DUCA RATUN PL 33490			100	
			) B3 CORI	AC SPRINGS, FC
/	)	1	<b>84</b> City	FL   85   Z0 C000 7
11. Pursuani	to the provisions of Sections 607,0502	and 607 1508 Florida Statutes,	the above-named co	rporation submits this statement for the purpose of changing its registered
11. Pursuan 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 agont, 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 above-named corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the above-named corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the appointment as registered agent.				
SIGNATURE COMMENT & Daniel				
Signature, typed or philing name of registered agent and title if applicative. (NOTE: Registered Agent signature required when reinstaling)  DATE				
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	DS CHOAN	☐ DELÆTE	1.1 TITLE	Change Addition
NAME	HETLAND, SUSAN		1.2 NAME 8	1550 NW 49th DR PORAL SPRINGS, PL 33067
STREET ADDRESS	9592 SADDLEBROOK DRIVE BOCA RATON FL 33496		1.3 STREET AODRESS	LORAL SPRINGS, PL 33067
CITY-ST-ZIP TITLE	DT DT	DELETE	1.4 City-ST-ZiP 2.1 HILE	Change Addition
NAME	DAVIS, GREGORY		2.2 NAME	
STREET ADDRESS	5107 PINETREE DRIVE		2.3 STREET ADDRESS	
CITY-ST-ZIP	DELRAY BEACH FL 33484		D 4 CITY OT 700	,
TITLE	DP	☐ DELETE	3.1 TITLE	Change
NAME	MYERS, GEORGE		3.2 NAME	8550 NILL HOTA DE
STREET ADDRESS	9592 SADDLEBROOK DRIVE		3.3 STREET ADDRESS	1.10 500 400 0 3047
CITY-ST-ZIP	BOCA RATON FL 33496		3.4. CITY - ST - ZIP	3550 NW HOTA DR CORAL SPRINGS, PC 33067
TITLE	DV	☐ DELETE	4.1 TITLE	Change Addition
NAME	MYERS, TIM		4. 2 NAME	
STREET ADDRESS	1215 SEAVIEW		4.3 STREET ADDRESS	
CITY-ST-ZIP	NORTH LAUDERDALE FL 3306		4.4 City-St-ZIP	
TITLE		DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-\$T-ZIP TITLE	·	☐ DELETE	5.4 CITY - ST - ZIP	☐ Change ☐ Addition
1		□ viceit	6.1 TITLE 6.2 NAME	Citalife   Macillott
NAME STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP	/ /		6.4 CITY-ST-ZIP	
	certify that the information supplied with	h this filing does no qualify for t		in Section 119.07(3)(i). Florida Statutes, I further certify that the Information

indicated on this annual report of 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.