

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #	P9600001	4259
	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,

1. Corporation Name

C

LEARWATER	CLOVER CORP.	

Jun 08, 1999 8:00 am Secretary of State

06-08-1999 90009 032 ***550.00



	_				
Principal Place	of Business	Mailing Address			
855 MANDALAY CLEARWATER F		855 MANDALAY AVE. CLEARWATER FL 34636- 3374	5 7		DO NOT WRITE IN THIS SPACE
II.					3. Date Incorporated or Qualifed 02/12/1996
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number Applied For
21		26			59-3365318 Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Additional Fee Required
City & State	9	City & State		-	6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
Zip	Country	Zip	Countr	у	8. This corporation owes the current year Intangible
24	25	293	0		Personal Property Tax. Yes No
	9. Name and Address of Curren	t Registered Agent			10. Name and Address of New Registered Agent
21.00			81	l Name	9
CLINE, HARRY S 400 CLEVELAND ST., STE. 800		82	Street	et Address (P.O. Box Number is Not Acceptable)	
CLEA	ARWATER FL 34615		83	3	
		T.	0.	City	■■ 85 Zip Code
			84	City	FL 83 Exp code
l office or re	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change was auth	norized by	, the corpo	d corporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered
SIGNATURE		note a		_t alt	e required when reinstating)
40	Signature, typed or printed name of registered age	ID DIRECTORS	13.	ant aignature i	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12.	DP OFFICERS AIN	DELETE	1.1 TITLE		OP Additi
NAME	CRONIN, LEO J	~	1.2 NAME		7680 V C
	855 MANDALAY AVE.		1	T ADDRESS	SOSS MANDALAY AVE
STREET ADDRESS	CLEARWATER FL 34630		1.4 CITY-1		CLEAD WATER FI 34630
TITLE	DVST	™ DELETE			CLEAR WATER, FL 34630 OVST Change Addition
ļ	CRONIN, TERRY C	A	22 NAME		CRONIN, LEO 5 AVE
NAME	855 MANDALAY AVE.		2.2 IVVVIE	T ADDDESS	OSS MANDALAY AVE
STREET ADDRESS	CLEARWATER FL 34630		2.4 CfTY-	ot 700	CLEAR WATER, FL 3 163.0
CITY-ST-ZIP	CLEARWATER FE 34030	☐ DELETE	31 TITLE	S1-2P	Change Additi
TITLE			3.2 NAME		
NAME			l	ET ADDRESS	2
STREET ADDRESS			3.4. CITY-		
CITY-ST-ZIP		☐ DELETE	4.1 TITLE	01-711.	☐ Change ☐ Additi
NAME		<u> </u>	4, 2 NAME	:	
l i				T ADDRESS	s
STREET ADDRESS			4.4 CITY-:		
CITY-ST-ZIP		☐ DELETE	5.1 TITLE	_	☐ Change ☐ Additi
NAME		<u></u>	5.2 NAME		
				T ADDRESS	s
STREET ADDRESS			5.4 CITY-		
CITY-ST-ZIP TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Additi
			6.2 NAME		
NAME				ET ADDRESS	s
STREET ADDRESS			6.4 CITY-		

14. I 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 that 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 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, with all other like empowered.

SIGNATURE: