## 2002 UNIFORM BUSINESS REPORT (UBR) Sep 08, 2002 8:00 am Secretary of State DOCUMENT # P96000048243 1. Entity Name 09-08-2002 90089 001 \*\*\*150.00 CLEARVIEW FINANCIAL CORPORATION Principal Place of Business Mailing Address 7081 GRAND NATIONAL DRIVE 7081 GRAND NATIONAL DRIVE SUITE #106 **SUITE #106** ORLANDO FL 32819 ORLANDO FL 32819 2. Principal Place of Business 3. Mailing Address I cot Black Icot Blud. 13825 DO NOT WRITE IN THIS SPACE 4004 City & State City & State 4. FEI Number Applied For 59-3380471 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent REDMOND. JOHN C 7081 GRAND NATIONAL DRIVE **SUITE #106** ORLANDO FL 32819 City 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of regis SIGNATURE 2 typed or printed name of registered agent and title if applicable 'DATE 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$550.00 Tax filing requirement and elects to do so 10. Election Campaign Financing **\$5.00** May Be After September 13, 2002 Fee will be \$750.00 Trust Fund Contribution. (See criteria on back) Added to Fees Make Check Payable to Department of State 11.84 CHYND MOTEUR'S 1751 'C OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE Change ☐ Addition REDMOND, JOHN C NAME NAME 7081 GRAND NATIONAL DRIVE, SUITE #106 STREET ADDRESS STREET ADDRESS ORLANDO FL 32819 CITY-ST-7/P CITY-ST-7IP TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE \_\_ Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITI F Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 13. 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 report or supplemental 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 11 or Block 12 if

empowered.

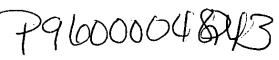
3 IV & PF 15... NO TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

FILED

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Clearview Financial Corporation 13825 Icot Boulevard Suite #604 Clearwater, FL 33760



Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

August 30, 2002

To Whom It May Concern:=

We changed the location of our office in February 2002. We did not receive our original Uniform Business Report. It was not forwarded by the post office, therefore we were unable to file and pay by the first deadline. For that reason, I was informed that you would excuse the late fees. I have enclosed a check for the original \$150.00 fee that was due. Please contact us with any questions.

Thank you,

John C. Redmond