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

**PROFIT CORPORATION ANNUAL REPORT** 



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

DOCUMENT # 1. Corporation Name P96000066558 (3)

CLEAR	water towing service, (	NC.								
Principal Place of Business Mailing Address							T HERINAL ALD FOLLS OLISE OF STATE OF S	BILLIA BILLA BILLA	iaun aura auga	
1597-B N HERCULES AVE 1597-B N HERCULES AVE										
CLEARWATER FL 33765 CLEARWATER FL 33765										
							DO NOT WRITE IN THIS SPACE			
<b>36</b>							3. Date Incorporated or Qualified			
2. Principal Place of Business 2a. Mailing Address							08/09/1996 4. FEI Number		pplied For	
21 26							59-3413148	Not Applicable		
Suite, Apt. #, etc. Suite, Apl. #,								\$8.75 Additional		
22		27	•				5. Certificate of Status Desired		equired	
City & State		City & State				6. Election Campaign Financing	\$5.00	May Be		
23		28				Trust Fund Contribution	Added	to Fees		
Zip	Country	Zip	Country				8. This corporation owes or has paid the			
24	25	[29]	30	_			Personal Property Tax due June 30.  10. Name and Address of New Registere		No No	
	g, Name and Address of Current	negistered Agent		81	Name		10. Name and Address of New Registers	o Agent		
	PRDNER-JAMES, TERRANCE				THATTIE					
6 NORFOLK ST				82 Street A		Addres	ss (P.O. Box Number is Not Acceptable)			
, ,	NEDIN FL 34698			83				<del></del>		
				84	City		F	85 Zip	Code	
11. Pursuant to the provisions of Sections 607 0502 and 607.1508, Florida Statutes, the above office or registered agent, or both, in the State of Florida Such change was authorized by agent, I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.						corpo			ts registered registered	
ľ	m ramiliar with, and accept the obligat	ions of, acciloit 607.0005, Fi	onda Sia	ioles	5.				1	
SIGNATURE	Signature, typed or proded name of registered agold	and title if niphrable (NO	I Registore	d Age	out signature	required	d when reinstalling) DATE		———— I,	
12.	OFFICERS AND						ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTOR	RS IN 12	
TITLE	P	<del>-</del>		1.1 TITLE			£	Change	Addition 3	
NAME	CORDNER-JAMES, TERENCE J		1.2 N	1.2 NAME					;	
STREET ADDRESS	#6 NORFOLK ST		1.3 ST		1.3 STREET ADDRESS				Įį.	
CITY-ST-ZIP	DUNEDIN FL 34698			1.4 CITY-ST-ZIP		ļ. <u>.                                   </u>				
TITLE	<del>-</del>		2.1 11	2.1 TITLE				☐ Change	Addition	
NAME	CORDNER-JAMES, SEAN		•		2.2 NAME				İ	
STREET ADDRESS	1961 CHENANGO AVE		2.3 STREET ADDR		ADDRESS				ļ	
CITY-ST-ZIP	CLEARWATER FL 33755			2.4 CITY - ST - ZIP		ļ		Change	Addition	
TITLE	<u> </u>			3.1 TITLE 3.2 NAME				□ Cusufis	- MODITION	
NAME OTDOOR ADDRESS					ADDRESS					
STREET ADDRESS	At the business the second									
CITY-ST-ZIP TITLE				3.4. City - St - ZiP 4.1 Title		<del> </del>		Change	Addition	
NAME		<u> </u>	4.21			}			_	
STREET ADDRESS			1		ADDRESS	İ			-	
CITY-ST-ZiP										
TITLE			4.4 CITY - ST - ZIP 5.1 TITLE				Change	Addition		
NAME			5.2 N	AME					ļ	
STREET ADDRESS			5.3 S	IRÉET	ADDRESS					
CITY-ST-ZIP				4 CITY-ST-ZIP						
TITLE		DELETE	611			1		☐ Change	Addition	
NAME			6.2 N	AME						
STREET ADDRESS			6.3 S	TREET	ADDRESS					
CITY+ST-ZIP			6.4 C	ITY-S	3T - ZIP	}				

14. Thereby 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 convergence of 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 in any attachment with an address.

**FILED** 

May 20 1998 8:00am

Secretary of State