

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000011584

1. Entity Name

CLEAR OCEAN INVESTMENTS CORPORATION

**FILED**  
**Apr 26, 2001 8:00 am**  
**Secretary of State**

04-26-2001 90060 043 \*\*\*158.75

Principal Place of Business

Mailing Address

~~ONE PROGRESS PLAZA~~  
~~SUITE #1210~~  
~~ST PETERSBURG FL 33701~~

~~ONE PROGRESS PLAZA~~  
~~SUITE #1210~~  
~~ST PETERSBURG FL 33701~~

2. Principal Place of Business

3. Mailing Address

5959 Central Ave  
Suite, Apt. #, etc.  
Suite 201

SAUCE  
Suite, Apt. #, etc.

City & State  
St. Petersburg, FL

City & State

Zip Country  
33710 Pinellas

Zip Country  
SAUCE



DO NOT WRITE IN THIS SPACE

4. FEI Number **59-3429384**

Applied For  
Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HAYES, GEORGE L III  
~~ONE PROGRESS PLAZA~~  
~~SUITE #1210~~  
~~ST PETERSBURG FL 33701~~

Name George L. Hayes III  
Street Address (P.O. Box Number is Not Acceptable)  
5959 Central Ave, Suite 201  
City St. Petersburg FL Zip Code 33710

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.

SIGNATURE GEORGE L. HAYES III

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible Tax filing requirement and effects to do so. (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PD	<input type="checkbox"/> Delete
NAME	HAYES, GEORGE L III	
STREET ADDRESS	<del>ONE PROGRESS PLAZA, #1210</del>	
CITY-ST-ZIP	<del>ST PETERSBURG FL 33701</del>	
TITLE	VD	<input type="checkbox"/> Delete
NAME	HOWELL, WILLIAM H	
STREET ADDRESS	<del>ONE PROGRESS PLAZA, #1210</del>	
CITY-ST-ZIP	<del>ST PETERSBURG FL 33701</del>	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
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TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SAUCE	
STREET ADDRESS	<u>5959 Central Ave, Suite 201</u>	
CITY-ST-ZIP	<u>St. Petersburg, FL 33710</u>	
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	<u>5959 Central Ave, Suite 201</u>	
CITY-ST-ZIP	<u>St. Petersburg, FL 33710</u>	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

GEORGE L. HAYES III, 4/11/01 (727) 381-9026  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Day and Phone #

CR2E034 (10/00)