## **2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)**

## P97000011584 **DOCUMENT #**

1. Entity Name

**CLEAR OCEAN INVESTMENTS CORPORATION** 



**FILED** Mar 31, 2003 8:00 am Secretary of State

03-31-2003 90155 025 \*\*\*150.00

| Principal Place of Business<br>5959 CENTRAL AVE<br>STE 104                                |                   |                                      | Mailing Address<br>P.O. BOX 14488<br>ST PETERSBURG FL 33733-4488 |  |  |                          |                             |  |
|---|-------------------|--------------------------------------|--|--|--|--------------------------|-----------------------------|--|
| SAINT PETERSB   | BURG FL 337       | 10                                   |  |  |  |                          |                             |  |
| 2. Principal Place of Business 3. Ma  |                   |                                      | 3. Mailing Address   | . Mailing Address  |  |                          | I IÇINI BIRI IBBI           |  |
| Suite, Apt. #, etc.   |                   |                                      | Suite, Apt. #, etc.  |  | CHECK HERE IF MAKING CHANGES               |                          |                             |  |
| City & State  |                   |                                      | City & State   |  | 4. FEI Number 59-3429384                   | 1 —                      | pplied For<br>ot Applicable |  |
| Zip   | i.                | Country                              | Zip<br>~   | Country  | 5. Certificate of Status Desired           | \$8.75 Ad<br>Fee Require | ditional<br>ed -            |  |
|   | 6. Name           | and Address of Current F             | Registered Agent   |  | 7. Name and Address of New                 | Registered Agent         |                             |  |
|   |                   |                                      |  | Name   | Name                                       |                          |                             |  |
| HAYES, GEORGE L III  5959 CENTRAL AVE  Street Address (P.O. Box Number is Not Acceptable) |                   |                                      |  |  | •  |                          |                             |  |
| 5959 CENTRAL AVE  |                   |                                      |  |  |  | <del></del>              |                             |  |
| STE 104   |                   |                                      |  |  |  |                          |                             |  |
| SAINT PETERSBURG FL 33710   |                   |                                      |  |  | City Zip Code                              |                          |                             |  |
| 8 The above of  | amed entity       | eubmite this statement for           | the nurnose of changing its                                      | registered office or regi  | stered agent or both in the State of F     | 1                        | and accept                  |  |
| the obligation  |                   |                                      | the purpose of changing he                                       | registered office of regi  | stered again, or boar, in the state of the | onda: Tam lammar with    | and docopt                  |  |
| SIGNATURE   |                   |                                      |  |  |  |                          |                             |  |
| . SIGNATURE<br>Si   | ignature, typed o | r printed name of registered agent a | nd title if applicable. (NOT)                                    | City  FL Zip Code  se of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept  sable. (NOTE: Registered Agent signature required when reinstating)  9. Election Campaign Financing Trust Fund Contribution.  \$5.00 May Be Added to Fees |  |                          |                             |  |
| Fil   | E NOW!!!          | FEE IS \$150.00                      |  |  |  |                          | <del></del>                 |  |
| After May 1, 2003 Fee will be \$550.00  |                   |                                      |  |  | , ,  |                          |                             |  |
|   |                   | Florida Department of                | State  |  | rust Funa Contributio                      | л. L. Adde               | d to rees                   |  |
| 10.   |                   | OFFICERS AND I                       | DIRECTORS  | 11.  | ADDITIONS/CHANGES TO OF                    | FICERS AND DIRECTOF      | RS IN 11                    |  |
|   | PD                |                                      | ☐ Delete   | TITLE  |  | ☐ Change                 | ☐ Addition                  |  |
|   |                   | ORGE L III                           |  | NAME   |  |                          |                             |  |
|   |                   | TRAL AVE STE 201                     |  | STREET ADDRESS   |  |                          |                             |  |
| +   |                   | ERSBURG FL 33710                     |  | CITY-ST-ZIP  | ·  |                          |                             |  |
|   | VD                | 470 1 1 4 5 4 1 1                    | ☐ Delete   | TITLE  |  | Change                   | Addition                    |  |
|   |                   | WILLIAM H<br>TRAL AVE, STE 201       |  | NAME<br>STREET ADDRESS   |  |                          |                             |  |
|   |                   | ERSBURG FL 33710                     |  | CITY-ST-ZIP  |  |                          | }                           |  |
| TITLE   | 4111 7 61         |                                      | Delete   | TITLE -  |  | Change                   | ☐ Addition                  |  |
| MANUE   |                   |                                      |  | A1444C   |  |                          |                             |  |

CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered

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