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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # CLEAN DUDS, INC. P97000046092 (7)

FILED May 20 1998 8:00am Secretary of State



Principal Place	e of Businass	Mailing Address		I CARNOON SOR COUNTY SAND COUNTY BOND BOND BOND COUNTY COUNTY TO BE
	IT.S UITE 600	100 LAURA ST.S UITE 600		
JACKSONVILI	LE FL 32202	JACKSONVILLE FL 32202		DO NOT WRITE IN THIS SPACE
}				3. Date Incorporated or Qualified
				05/19/1997
2. Principal P	lace of Business,	2a. Mailing Address		4. FEI Number Applied For
21 915	VACHT HARBOR (7. 26 PO. BOX	331397	59-345222/ Not Applicable
Suite, Apt.		Suite, Apt. #, etc.		5. Certificate of Status Desired S8.75 Additional
22		27		Fee Required
City & State		City & State	Donne CI	6. Election Campaign Financing \$5.00 May Be
23 ACK	BONVILLE F.L.	28 ATLANTIC	BEACH, F-L	Trust Fund Contribution
Zip Country Zip Country 210 32233 30 DUV				This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No
a Name and Address of Current Registered Agent				
BLACKARD, WILIAM R JR (81 Name (1 0 0) VALATT				
100 LAURA ST,S UITE 600 NO MAIL TO B2 Sirget Addreps (P,O, Box Nurryber is Not Acceptable)				
BLACKARD, WILIAM R JR 100 LAURA ST,S UITE 600 JACKSONVILLE FL 32202 BE SENT TO THIS B2 Stree 97. B3 AD DESS PECHANICAL 84 City. 11. Pursuant to the provisions of Sections 607.05.02 Moreover, 15.08, Florida Statutes, the above-name) 62 Street Ad	VACHT HARBING CT.
16 3EN 11 10 5 83				
	, ,	20055 CABINE.	84 City.	-
	ρ	DICT REMAILS	84 City.	ACKSON VILLE FL 85 Zip Code 32225
11. Pursuant t	to the provisions of Sections 607.	0502 dis 07.1508, Florida Statutes	, the above named co	orporation submits this statement for the purpose of changing its registered
Office or n	egistered agent, or both, in the S m familiar with, and accept the ol	ate of Florida. Such ch ange was au t bligations of, Sec tion 607,0505 , Flori	thorized by the corpor da Statutes	ration's board of directors. I hereby accept the appointment as registered
SIGNATURE		all Socttreas.		4/21/96
Old With the lie	Signature, typed or probed agene of regish to	dagentandficitapplicable (NOTE)	Registered Agent signature rec	quired when reinstating) DATE
12.	PD	AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	KNOTT, ROGER D JR	DELETE	1.1 TIBLE	L Change Addition
NAME	P O BOX 331397 N/A		1.2 NAME	1
STREET ADDRESS	ATLANTIC BEACH FL 322	22	1.3 STREET ADDRESS	
CITY-ST-ZIP TITLE	81D	DELETE	1.4 CITY - ST - ZIP 2.1 TITLE	Change Addition
NAME	KNOTT, CAROL J		2.1 INTE 2.2 NAME	Citalige C Addition
STREET ADDRESS	P O BOX 331397 N/A		2 3 STREET ADDRESS	
CITY-ST-ZIP	ATLANTIC BEACH FL 322	23	2 4 CITY-ST-7IP	
TITLE		☐ DELETE	3.1 TITLE	Change Addition
NAME			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
City-ST-ZIP			3.4. CITY-ST-ZIP	
TITLE		DELETE	4.1 THLE	☐ Change ☐ Addition
NAME			4. 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP	<u> </u>		4.4 CITY-ST-ZIP	
TITLE		DELETE	5.1 TITLE	Change Addition
NAME			5.2 NAME	_
STREET ADDRESS			5.3 STREET ADDRESS	*
CITY-ST-ZIP			5.4 CITY - ST - ZIP	
TITLE		☐ DELETE	6.1 TITLE	Change Addition
NAME			6.2 NAME	
STREET ADDRESS			6 3 STREET ADDRESS	
CITY-ST-ZIP		all collection of the filter of the second o	64 CITY-ST-ZIP	Control (10 pt/p)(2) File (1) Control (1) (1)
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 charged, or on an attachment with an address.				

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