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

P97000075032 (7) DOCUMENT #

CLEARVIEW MOBILE HOMES, INC.

FILED Apr 28 1998 8:00am Secretary of State



1998

Principal Place of Business Mailing Address							
777-\$QUTH-1	d. Dertleo: 200 F lagler Drive Guite-600 e Beach Fl. 83401	C /O JAMES B. BERTLES, ESO. 777 SO UTH FLAGLER DRIVE SUITE 500E WEST PA LM BEACH FL 33401 -		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified			
					08/28/1997		
2. Principal Place of Business 2a. Mailing Address					4. FEI Number	Applied For	
	WILLIAM B. ANDERSON 26%WILLIAM E		. ANDERSON		6 5 -0777328	Not Applicable	
Suite, Apt. COMEAU BUILDING, SUITE 107		Suit COMPAU BUILDING, SUITE 107			\$8.75 Additional		
22 SI9 CLEMATIS STREET WEST PALM BEACH, FLORIDA		27 WEST PALM BEACH, FLORIDA Cily & State 33401-4618		5. Certificate of Status Desired	Fee Required		
		28		6. Election Campeign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip	Country	Zφ	Count	•	8. This corporation owes or has paid the c	· ·	
24	25 PALM BEACH	29	30 PALA	BERCH	Personal Property Tax due June 30.	Yes No	
g, Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent		
VALDES-FAULI CORPORATE SERVICES, INC.				81 Name			
777 SOUTH FLAGLER DRIVE SUITE 500E				2 Street Addr	ress (P.O. Box Number is Not Acceptable)		
WEST PALM BEACH FL 33401					ess (1.0. bbx Nullibel 13 Not Acceptable)		
			8	3			
			8	4 City	F	85 Zip Code	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.							
SIGNATURE Signature, typed or printed name of registered agent and to ell' applicable. (NOTE Registered Agent signature required when reinstating) DATE							
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12	
TITLE	PRESIDENT DELETE		1.1 1011			Change Addition	
NAME	WILLIAM BLODGETT		1.2 NAM				
· · ·	•••						
STREET ADDRESS	1426 NO OCEAN BLVD.			ET ADDRESS			
CITY-ST-ZIP	PALM BEACH, FL 33480			-ST-ZIP		Change Addition	
TITLE	SECRETARY	∐ DELET e	2.1 T(TL)			Change Addition	
NAME	ALICIA BLODGETT		2.2 NAM	Ē			
STREET ADDRESS	1426 NO. OCEAN BLVD.		2.3 STRE	ET ADDRESS			
CITY-ST-ZIP	PALM BEACH, FL 33480			- S1 - ZIP			
TITLE		☐ DELE te	3.1 T(TL)			Change Addition	
NAME			3.2 NAM	E			
STREET ADDRESS			3.3 STR	ET ADDRESS			
CITY-ST-ZIP			3,4. C(T)	- ST- ZIP			
TITLE		DELETE	4.1 TITLE			Change Addition	
NAME			4. 2 NAN	ne			
STREET ADORESS				ET ADDRESS			
CITY-ST-ZIP				-ST-ZIP			
TITLE		DELETE	5.1 TITLE			Change Addition	
NAME			5.2 NAM			- • -	
STREET ADDRESS				ET ADDRESS			
			5.4 City				
CITY-ST-ZIP		DELETE	6.1 TrTLI			Change Addition	
TITLE		E' DECERT	1				
NAME			6.2 NAM				
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP	C C	. 400 million and 200 million and 200 million	6.4 CITY		Cooling 110 07/0V/). Florida Ciatrias 14 min.	agetifus that the information	
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 changed, or on an attachment with an address.							