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 # P97000086936 (6)

CLEAN LAND COMPANY

FILED May 19 1998 8:00am Secretary of State



Principal Place	of Business	Mailing Address			(1001100: 110 1011) 10011 00111 00111 00111 10110 01111 10110 11110 01111
2090 PALM BEACH LAKES BLVD. #800 2090 PALM BEACH LAKES BLVD. #800				800	
WEST PALM	BEACH FL 33409	WEST PALM BEACH	FL 33409		DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualified
					10/07/1997
2. Principal Pl	ace of Business	2a, Mailing Address			4. FEI Number Applied For
21		26			65-0786902 Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additional
22		27			- Fee Required
City & State		City & State	•••••		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
23 Zip	Country	28 Zip	Count	nv.	
24	25 29		30		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.
24	g, Name and Address of Curr		130		10. Name and Address of New Registered Agent
CH	ILLINGWORTH, CHARLES C E	so	6	1 Name	
	ILLINGWORTH & CONWAY, P.		ē	2 Street	Address (P.O. Box Number is Not Acceptable)
2090 PALM BEACH LAKES BLVD. #800				2 311001	Address (F.O. Dox Municer is Not Acceptable)
	ST PALM BEACH FL 33409		8	3	
			9	4 City	■■ 85 Zip Code
				City	FL S 25 000
11. Pursuant t	o the provisions of Sections 607.0 egistered agent, or both, in the Sta or femiliar with, and accept the obli-	502 and 607.1508, Florida State of Florida. Such change with a florida. Such change with a florida of 505.0505.	atutes, the aboves authorized Statut	ive-named by the corp es	corporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered
SIGNATURE	The factor of the factor of the same	ignitional or, execution correspond	o, i longa chilo		
	Signature, typest or printed name of registered a	agent and title if applicable	(NO1): Registered A	gent signature	e required when reinstating) DATE
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PTD	DELETE	1.1 THE		Change Addition
NAME	CHILLINGWORTH, CHARLE		1.2 NAM	E	
STREET ADDRESS	2090 PALM BEACH LAKES		1.3 STRE	ET ADDRESS	
CITY-ST-ZIP	WEST PALM BEACH FL 33		1.4 CITY		
TITLE	SD SEVETE HELEN K	DELETE	- ·		S Change ☐ Addition
NAME	FEKETE, HELEN K	DIVE #000	2.2 NAM		
STREET ADDRESS	2090 PALM BEACH LAKES WEST PALM BEACH FL 33			ET ADDRESS	
CITY-ST-ZIP	WEST FALM DEACH FL 33	DELETE		'- \$1 - 7IP	Change Addition
TITLE		C) DECETE	3.1 IIILI 3.2 NAM		
NAME ethert annicce				ET ADDRESS	
STREET ADDRESS CITY-ST-ZIP				-ST-ZIP	
TITLE	, _ , _ ,	DELETE			Change Addition
NAME			4. 2 NAN		
STREET ADDRESS				ET ADDRESS	
CITY-ST-ZIP			4.4 CITY		
TITLE		☐ DELETE			Change Addition
NAME			5.2 NAM	E	
STREET ADDRESS			5.3 STRE	ET ADDRESS	
CITY-ST-ZIP			5.4 CITY	-ST-ZIP	
TITLE		DELETE	6.1 TITLI		☐ Change ☐ Addition
NAME			6.2 NAM	É	
STREET ADDRESS			6.3 STR	ET ADDRESS	
CITY-ST-ZIP				-ST-ZIP	
14. I hereby o	ertify that the information supplied	with this filing does not quat	ify for the exen	iption state	ed in Section 119.07(3)(i), Florida Statutes. I further certify that the information
officer or of Block 12 of	director of the corporation or the re or Block 13 if changing, or on an at	ceiver or trustee empowered tachment with an address.	d to execute	BLAKIN'as	standard by the same legal effect as if made under oath; that I am an storius III am an