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 # **P97000099056** (8)

CLEAR HORIZONS, INC.

FILED Jan 23 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						. (641/88) JIN 1841/ 188/1 88/11 88/11 88/11 88/11 11	110 PD111 08101	Aires Afti (AB)
1927 SOUTH 14TH STREET. SUITE 115 1927 SOUTH 14TH STREET.					15			
FERNANDINA BEACH FL 32034 FERNANDINA BEACH FL :				•		DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualified	3FACE	
						11/18/1997		
2. Principal i	Place of Business	2a, Mailing Ad	dress			4. FEI Number		Applied For
21		26				59-3480924		Not Applicable
Sulte, Apt.	#, etc.	Suite, Apt.	#, etc.					Additional
22		27				5. Certificate of Status Desired	Fee	Required
City & Sta	te	City & Stat	City & State			6. Election Campaign Financing	\$5.0	0 May Be
23		28				Trust Fund Contribution	Adde	d to Fees
Zip	Country	Zφ		Country	1	8. This corporation owes or has paid the cu		
24	25	29	30					Z No
DC	g. Name and Address of Curre	nt Registered Agen		81	l Name	10. Name and Address of New Registered	Agent	
	ONAS, NICK D			01	Name			
907 STANLEY DRIVE				82	2 Street Address (P.O. Box Number is Not Acceptable)			
rc	RNANDINA BEACH FL 32034			-				
				83	•			
				84	City		85 Zip	p Code
P		20 1007 1005 51			l	FL	<u> </u>	
office or agent. I a	registered agent, or both, in the State am familiar with, and accept the oblig	uz and 607, 1508, Fide e of Florida. Such cha actions of, Section 60	rida Statutes, the ange was author 7.0505. Florida 9	e abovi ized by Statute:	e-riamed cor / the corpora s.	poration submits this statement for the purpose of ation's board of directors. I hereby accept the ap	of changing pointment a	its registered as registered
SIGNATURE		,	, , , , , , , , , , , , , , , , , , , ,					
OIGHATOTE	Signature typed or printed name of registered ag		(NOTE Regis	lered Age	ent signature requ	ired when reinstating) DATE		
12.	OFFICERS AN	ID DIRECTORS		3		ADDITIONS/CHANGES TO OFFICERS AN		
TITLE	HARDY, CARL PATRICK	П		.1 TITLE			∐, Change	Addition
NAME	824 NORTH FLETCHER AVE		1,	.2 NAME				
STREET ADDRESS	FERANDINA BEACH FL 3203		1.	.3 STREET	ADDRESS			j
CITY-ST-ZIP	D			4 CITY - S	T-ZIP			
TITLE	DE ONAS, NICK D			1 TITLE			∐ Change	e
NAME	907 STANLEY DRIVE		_	2 NAME				
STREET ADDRESS	FERNANDINA BEACH FL 320	134			ADDRESS			
CITY-ST-ZIP TITLE				4 CITY - 9	ST-ZIP		T Observe	1 1 4 5 1 5 1
NAME				.1 TITLE .2 Name			☐ Change	Addition
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP				4. CITY - S				
TITLE				4. GITTLE	11- ZIF		Change	Addition
NAME				2 NAME				C Addition
STREET ADORESS					ADDRESS			
CITY-ST-ZIP				a sineei 4 City-s				
TITLE	78			1 TITLE	1-21		Change	Addition
NAME				2 NAME			Shange	1,000,000
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP				a City-S				
TITLE	-			1 TITLE	1-415		Change	Addition
NAME				2 NAME				Addition
STREET ADDRESS					ADDRESS			
CITY-SI-ZIP			ľ	3 STREET 4 CITY-S				
OUT OF ER			■ 6.4	4 6111-5	1-617			

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.

Week D Donne V D

, , ,