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

CITY-ST-ZIP

**FILED PROFIT** May 13 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # V61375 **CLEARWATER SUN INCORPORATED** Principal Place of Business Mailing Address 1055 STEPHEN FROST DR. 1055 STEPHEN FOSTER DRIVE LARGO FL 34641-1307 LARGO FL 34641-1307 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/31/1992 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 59-3144597 Not Applicable Sulte, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5, Certificate of Status Desired Fee Regulred 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 Personal Property Tax due June 30. 29 30 g, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name KNOWLTON, HORACE A., IV 442 W. KENNEDY BLVD. 62 Street Address (P.O. Box Number is Not Acceptable) SUITE 280 83 TAMPA FL 33606 84 City Zip Code 11. Pursuant to the provisions of Sections 607.05:02 and 607.15:08, 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. I am familiar with, and accept the obligations of, Section 607.05:05, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and tile if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE Change Addition 1 1 TITLE DOSS, STEVEN A. NAME 1.2 NAME 1055 STEPHEN FOSTER DR. STREET ADDRESS 1.3 STREET ADDRESS LARGO FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Addition TITLE 2.1 TITLE Change NAME 22 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE TITLE 3 1 TITLE \_\_\_ Change \_\_\_ Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change TITLE Addition 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE TITLE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-7/9 TITLE ☐ DELETE Addition 61 TITLE NAME 62 NAME STREET ADDRESS 6.3 STREET ADDRESS

6.4 CITY - ST - ZIP 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

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