## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## Apr 03, 2006 8:00 am Secretary of State **DOCUMENT #821546** 04-03-2006 90371 048 \*\*\*150.00 1. Entity Name CLARK EQUIPMENT COMPANY 60024077 Principal Place of Business Mailing Address 155 CHESTNUT RIDGE 155 CHESTNUT RIDGE ATTN: TAX DEPARTMENT MONTVALE, NJ 07645 MONTVALE, NJ 07645 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 02272006 CR2E034 (11/05) City & State City & State 4. FEI Number Applied For 38-0425350 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324 City Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. CP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NACHITGAL, P NAME NAME 155 CHESTNUT RIDGE RD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MONTVALE, NJ 07645 CITY-ST-ZIP TITLE CSVP Delete TITLE ☐ Change ☐ Addition Santoro, BArbara 155 Chestrut Place Load HELLER, RONALD G. NAME NAME STREET ADDRESS 155 CHESTNUT RIDGE RD STREET ADDRESS Montrale, NJ 07645 CITY-ST-ZIP MONTVALE, NJ 07645 CITY-ST-ZIP **VPAT** Delete ☐ Addition TITLE THE ☐ Change WILSTED, J NAME NAME 155 CHESTNUT RIDGE RD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MONTVALE, NJ 07645 CITY - ST- 7IP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

TITLE

NAME STREET ADDRESS

TITLE

NAME STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-7/P

SIGNATURE:

TITLE

NAME

TITLE

NAME

TITLE

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

PLASYNSKI, J.M.

VΡ

VP

RYAN, M.J.

155 CHESTNUT RIDGE RD

155 CHESTNUT RIDGE RD

155 CHESTNUT RIDGE RD

MONTVALE, NJ 07645

MONTVALE, NJ 07645

SWIMMER, GERALD E

MONTVALE, NJ 07645

NTED NAME OF SIGNING OFFICER OR DIRECTOR VATURE AND

☐ Defete

Delete

☐ Delete

Moran, G.T. 155 Chestrut Kider Road

248CO ZIO, sharhom

Daytma Phone #

☐ Change

☐ Change

Change

Addition

☐ Addition

Addition

**FILED**