# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Jan 26, 2011**
**Secretary of State**

DOCUMENT# F08000001049

**Entity Name:** CLARKE AQUATIC SERVICES, INC.

**Current Principal Place of Business:**

3036 MICHIGAN AVE
KISSIMMEE, FL 34744

**New Principal Place of Business:**

**Current Mailing Address:**

159 N. GARDEN AVENUE
ROSELLE, IL 60172

**New Mailing Address:**

**FEI Number: 13-4306095** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

**OFFICERS AND DIRECTORS:**

Title: C
Name: CLARKE, MARY K
Address: 159 N GARDEN AVE
City-St-Zip: ROSELLE, IL 60172

Title: PDT
Name: CLARKE, III, JOHN L
Address: 159 N GARDEN AVE
City-St-Zip: ROSELLE, IL 60172

Title: S
Name: TECSON, ANDREW P
Address: 30 S WACKER DR SUITE 2600
City-St-Zip: CHICAGO, IL 60606

Title: VP
Name: DRAGO, JOSEPH A
Address: 159 N GARDEN AVENUE
City-St-Zip: ROSELLE, IL 60172

Title: VP
Name: FRUENDT, JOEL
Address: 159 N GARDEN AVENUE
City-St-Zip: ROSELLE, IL 60172

Title: VP
Name: MAGRO, A.KEVIN
Address: 159 N GARDEN AVENUE
City-St-Zip: ROSELLE, IL 60172

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: JOHN LYELL CLARKE, III PDT 01/26/2011

Electronic Signature of Signing Officer or Director — Date