

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Mar 31, 2008 8:00 am
Secretary of State**

03-07-2008 90043 024 ***150.00

DOCUMENT # P02000012987 1. Entity Name CLARK ENVIRONMENTAL SERVICES, INC	
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Principal Place of Business 4390 CR. 502 WILDWOOD, FL 34785	Mailing Address 4390 CR. 502 WILDWOOD, FL 34785
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DO NOT WRITE IN THIS SPACE



02042008 No Chg-P CR2E034 (11/05)

4. FEI Number 02-0546293	Applied For ☐ Not Applicable
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent CLARK, FRANK 4390 C.R. 502 WILDWOOD, FL 34285

**DO NOT WRITE
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D CLARK, FRANK 225 BARON ROAD ORLANDO, FL 32828
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D CLARK, AMY 225 BARON ROAD ORLANDO, FL 32828
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

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

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

Amy A. Clark
3/25/08 407-387431