

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

CORPORATION  
ANNUAL REPORT  
**1995**



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morthe  
Secretary of State  
DIVISION OF CORPORATIONS

**APPROVED  
AND  
FILED**

**95 MAY -1 PM 4:17**

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT # J43434 (6)**

1. Corporation Name

~~PALM BEACH INSURANCE CENTRAL, INC.~~

**CLARK, OEN, JOHNSON & FISCHER INC.**

Principal Place of Business

1800 AUSTRALIAN AVE S  
#202  
WEST PALM BEACH FL 33409  
US

Mailing Address

1800 AUSTRALIAN AVE S  
#202  
WEST PALM BEACH FL 33409  
US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

**11/21/1986**

3a. Date of Last Report

**03/11/1994**

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

4. FEI Number

**59-2854321**

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75** Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

**\$5.00** May Be  
Added to Fees

7. This corporation has liability for intangible tax under C. 193.002,  
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

OEN, RICHARD F.  
1800 AUSTRALIAN AVE S  
SUITE 202  
WEST PALM BEACH FL 33409

81 Name

**Kevin F. Richardson, Esquire**

82 Street Address (P.O. Box Number is Not Acceptable)

**1551 Forum Place, Suite 300-F**

83

84 City

**West Palm Beach**

FL

85 Zip Code  
**33401**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and the # applicable

**Kevin F. Richardson**

(NOTE: Registered Agent signature required when consulting)

DATE

**4-25-95**

12. OFFICERS AND DIRECTORS

TITLE	P
NAME	CLARK, WILLIAM C.
STREET ADDRESS	1800 AUSTRALIAN AVE S SUITE 202
CITY - ST - ZIP	WEST PALM BEACH FL
TITLE	S
NAME	JOHNSON, KATHLEEN M.
STREET ADDRESS	1800 AUSTRALIAN AVE S, #202
CITY - ST - ZIP	WEST PALM BEACH FL
TITLE	CT
NAME	OEN, RICHARD F.
STREET ADDRESS	1800 AUSTRALIAN AVE S, #202
CITY - ST - ZIP	WEST PALM BEACH FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	P/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY - ST - ZIP		
2.1 TITLE	V/S/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY - ST - ZIP		
3.1 TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY - ST - ZIP		
4.1 TITLE	V/D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	FISCHER, ERIC J.	
4.3 STREET ADDRESS	1800 Australian Ave S, #202	
4.4 CITY - ST - ZIP	West Palm Beach, FL	
5.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	CLARK, BETTY L.	
5.3 STREET ADDRESS	1800 Australian Ave S, #202	
5.4 CITY - ST - ZIP	West Palm Beach, FL	
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY - ST - ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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 and changed, or upon appointment with an address.

SIGNATURE:

**William C. Clark**

**4/26/95**

**407/640-0600**

(SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR)

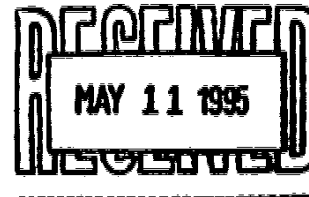
Date

Telephone Number



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State

May 8, 1995



PALM BEACH INSURANCE CENTRAL, INC.  
1800 AUSTRALIAN AVE S  
#202  
WEST PALM BEACH, FL 33409US

SUBJECT: PALM BEACH INSURANCE CENTRAL, INC.  
Ref. Number: J43434

Please be advised, we have received your Annual Report; however, the document has not been filed and is being returned for the following:

The records of the Division of Corporations do not reveal that the name of this corporation has been changed with our office as indicated on the enclosed annual report. This annual report cannot be filed under the new name until an amendment to change the name has been filed. Instructions and/or forms to change the name are enclosed for your convenience. Please return the amendment and annual report together.

**NOTE: YOU HAVE 30 DAYS FROM THE DATE OF THIS LETTER TO MAKE THE CORRECTIONS AND RETURN THE DOCUMENT AND NOT HAVE TO PAY THE LATE FEE OF \$25.00.**

**PLEASE RETURN A COPY OF THIS LETTER WITH THE CORRECTED DOCUMENT TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FLORIDA 32314.**

If you have additional questions or need further assistance, please call the Annual Report Section at (904) 487-6056.

Thank you,

Antonio Mathews  
ANNUAL\_REPORTS Section

Letter number: 095A00022524

JUNE 2, 1995

ATTACHED ARE COPIES OF THE ARTICLES OF AMENDMENT FILED LATE APRIL/EARLY MAY AND PROBABLY HAD NOT YET BEEN PROCESSED WHEN YOU RECEIVED OUR ANNUAL REPORT. WE NOW HAVE NOTIFICATION THAT PAPERWORK HAS BEEN PROCESSED BY THE DIVISION OF CORPORATIONS. ALSO ATTACHED IS OUR ORIGINAL ANNUAL REPORT AND CHECK IN THE AMOUNT OF \$200.00 WHICH WE ARE RESUBMITTING FOR FILING. WE TRUST THAT ALL IS IN ORDER.

CORDIALLY,

ROXANNE GLIDDEN  
Corporate Administration  
Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

543434

ARTICLES OF AMENDMENT

1. The following provisions of the Articles of Incorporation of PALM BEACH INSURANCE CENTRAL, INC., a Florida corporation, filed in Tallahassee on November 21, 1986 be and they hereby are amended in the following particulars:

ARTICLE I- BE AND IT HEREBY IS AMENDED TO  
READ AS FOLLOWS:

The name of this corporation is CLARK, OEN,  
JOHNSON & FISCHER, INC.

2. The foregoing amendments were adopted by the shareholders and Directors of the corporation on April 10, 1995.

3. The number of votes cast for the Amendment by the shareholders was sufficient for approval.

IN WITNESS WHEREOF, the undersigned president and secretary of this corporation have executed these Articles of Amendment this 10th day of April, 1995.

*William C. Clark*

PALM BEACH INSURANCE CENTRAL, INC.  
now known as CLARK, OEN, JOHNSON & FISCHER, INC.

By: William C. Clark, President

*Kathleen Johnson*  
Kathleen Johnson, Secretary

The foregoing Affidavit was acknowledged before me this 10th day of April, 1995, by WILLIAM C. CLARK, who has produced 15 personally known to me as identification and who did/did not take an oath.



*Roxanne Glidden*  
NOTARY PUBLIC  
State of Florida at Large  
#CC375444  
My Commission Expires: 6/2/98

543424

WRITTEN CONSENT OF THE DIRECTORS  
IN LIEU OF SPECIAL MEETING OF  
BOARD OF DIRECTORS  
OF  
PALM BEACH INSURANCE CENTRAL, INC.


The undersigned persons, being all of the Directors of the above named corporation, hereby take the following action by written consent in lieu of a special meeting of the Board of Directors:


RESOLVED AS FOLLOWS:

1. That the name of the corporation be changed to that of CLARK, OEN, JOHNSON & FISCHER, INC.
2. That the president and secretary be and they hereby are authorized and directed to execute articles of amendment of the articles of incorporation and to have said instrument filed in the office of the Secretary of State in Tallahassee, Florida.
3. That the secretary be and hereby is authorized to execute a certificate of amendment of the by-laws of this corporation evidencing the change of the corporate name as authorized hereby and to affix said certificate to the by-laws of this corporation.
4. That the president and secretary be and they hereby are authorized and directed to execute any further documents, pay the necessary fees and costs, and do any and all things that may be necessary to effectuate the foregoing resolutions.

DATED: April 10, 1995

  
\_\_\_\_\_  
William C. Clark, President and  
Director

  
\_\_\_\_\_  
Kathleen Johnson, Secretary and  
Director

  
\_\_\_\_\_  
Eric Fischer, Vice President and  
Director

J43434


CERTIFICATE OF AMENDMENT OF BY-LAWS  
OF  
PALM BEACH INSURANCE CENTRAL, INC.

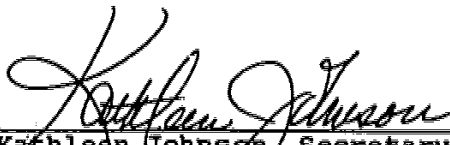
The undersigned, as secretary of CLARK, OEN, JOHNSON & FISCHER, INC., a Florida corporation, does hereby certify that the following amendment to the by-laws of this corporation was duly adopted at a meeting of the members and directors held on April 10, 1995, at which a quorum was present and by unanimous written consent of the member and directors as authorized by the Florida not for profit corporation act on April 10, 1995.

RESOLVED AS FOLLOWS:

1. The name of the corporation is changed to CLARK, OEN, JOHNSON & FISCHER, INC.

DATED: April 10, 1995

  
\_\_\_\_\_  
PALM BEACH INSURANCE CENTRAL, INC.  
now known as CLARK, OEN, JOHNSON &  
FISCHER, INC.

  
\_\_\_\_\_  
Kathleen Johnson Secretary