

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L78428

Entity Name: JCLK CORPORATION

FILED  
Apr 10, 2005  
Secretary of State

## Current Principal Place of Business:

4053 ARDEN WAY NE  
ATLANTA, GA 30342 US

## New Principal Place of Business:

## Current Mailing Address:

4053 ARDEN WAY NE  
527 EAST UNIVERSITY AVE  
ATLANTA, GA 30342 US

## New Mailing Address:

4053 ARDEN WAY NE  
ATLANTA, GA 30342 US

FEI Number: 59-3011040

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FITZGERALD, CONSTANCE R  
709 S.W. 27TH STREET  
GAINESVILLE, FL 32607 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: FITZGERALD, CONSTANC, E R.  
Address: 709 SW 27TH STREET  
City-St-Zip: GAINESVILLE, FL

Title: PST ( ) Delete  
Name: FITZGERALD, KATHLEEN R  
Address: 4053 ARDEN WAY NE  
City-St-Zip: ATLANTA, GA 30342

Title: VP ( ) Delete  
Name: FITZGERALD, LISA  
Address: 723 SUTTER ST  
City-St-Zip: SAN DIEGO, CA 92103

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: FITZGERALD, CONSTANC, E R.  
Address: 709 SW 27TH STREET  
City-St-Zip: GAINESVILLE, FL 32607

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: KATHLEEN FITZGERALD

PST

04/10/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date