FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

NAME

STREET ADDRESS

CITY-ST-ZIP

FILED Apr 30 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State **DIVISION OF CORPORATIONS** 1998 DOCUMENT # 232030 D.G. CLARK COMPANY Principal Place of Business Mailing Address 3205 HANSON STREET 3205 HANSON STREET FT MYERS FL 33916 FT MYERS FL 33916 DO NOT WRITE IN THIS SPACE US 3. Date Incorporated or Qualified 01/11/1960 2. Principal Place of Business 2a. Mailing Address Applied For 59-0870352 26 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be П 23 28 Trust Fund Contribution Added to Fees Zip Country Country This corporation owes or has paid the current year Intangible □ No 30 Personal Property Tax due June 30. Yes Yes 24 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name CLARK, D.G. 3205 HANSON STREET 82 Street Address (P.O. Box Number is Not Acceptable) FT MYERS FL 33916 83 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, typied or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE TITLE 1.1 TITLE ☐ Change NAME MORTON, SANDRA CLARK 1.2 NAME 101 TIMBERIDGE RD STREET ADORESS 1.3 STREET ADDRESS ZIP 18946 18940 **NEWTOWN PA** CITY-ST-ZIP 1.4 CITY - ST- ZIP DELETE 2.1 TITLE TITLE NAME TOUT, A J 22 NAME ZIP 33916 2875 PALM BEACH BLVD STREET ADDRESS 2.3 STREET ADDRESS FT MYERS FL 2. 4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change **Addition** TITLE 3.1 TITLE CLARK, D G NAME 3.2 NAME ZIP 33916 3208 HANSON STREET 3 3 STREET ADDRESS STREET ADDRESS 33916 FT MYERS FL CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE TITLE 4.1 TITLE NAME MAGEE, THOMAS B 4. 2 NAME 18060 SLATER ROAD 4.3 STREET ADDRESS STREET ADDRESS 33917 NORTH FT MYERS FL 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADORESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change ☐ Addition TITLE 6.1 TITLE 6.2 NAME

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report is further certify that the information indicated on this annual report is further certify that the information indicated on this annual report is further certify that the information indicated on the information indica SIGNATURE:

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP