

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # 409387 (8)

1. Corporation Name
CLARENCE NAHM, INC.



Principal Place of Business: 9743 W. HILLSBOROUGH AVE. TAMPA FL 33615
Mailing Address: 9743 W. HILLSBOROUGH AVE. TAMPA FL 33615

3. Date Incorporated or Qualified: 09/25/1972
3a. Date of Last Report: 08/10/1995

2. Principal Place of Business: 21 17010 CRAWLEY RD.
2a. Mailing Address: 26 17010 CRAWLEY RD.

4. FEI Number: 59-1415132
Applied For: Not Applicable

22. Suite, Apt. #, etc.:
27. Suite, Apt. #, etc.:

5. Certificate of Status Desired: \$8.75 Additional Fee Required

23. City & State: ODESSA, FL.
28. City & State: ODESSA, FL.

6. Election Campaign Financing: \$5.00 May Be Added to Fees

24. Zip: 33556-2049, Country: US
29. Zip: 33556-2049, Country: US

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent
NAHM, MARK B.
9743 W HILLSBOROUGH AVE
TAMPA FL 33615

10. Name and Address of New Registered Agent
81 Name: MARK NAHM
82 Street Address (P.O. Box Number is Not Acceptable): 17010 CRAWLEY RD.
83
84 City: ODESSA, FL 85 Zip Code: 33556-2049

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: *Mark B. Nahm*, MARK B. NAHM PRES. 15MAY96
Signature, typed or printed name of registered agent and the filer, if applicable. (NOTE: Registered Agent signature required when registering.) DATE

12. OFFICERS AND DIRECTORS

TITLE	PVT	<input type="checkbox"/> DELETE
NAME	NAHM, MARK B	
STREET ADDRESS	17010 CRAWLEY ROAD	
CITY - ST - ZIP	ODESSA FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	33556-2049
2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
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 119.07(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 if changed, or on an attachment with an address.

SIGNATURE: *Mark B. Nahm* MARK B. NAHM 15MAY96 8139204583
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE DAYTIME PHONE #

CR2E034 (12/95)