

2001 UNIFORM BUSINESS REGISTER (UBR)

4/3/

FILED

Apr 16, 2001 8:00 am
Secretary of State

04-03-2001 90006 048 ***158.75

DOCUMENT # 484753

1. Entity Name
CLARK SCREEN-N-CLOSURES, INC.

Principal Place of Business
3090 WINTERLAKE RD
LAKELAND FL 33803
US

Mailing Address
3090 WINTERLAKE RD
LAKELAND FL 33803
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 59-1642920

Applied For

Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CLARK, HAROLD
3090 WINTERLAKE RD
LAKELAND FL 33803

Name
~~CLARK HAROLD R JR~~
Street Address (P.O. Box Number is Not Acceptable)
342 ECHO PINES WAY
City LAKELAND FL Zip Code 33813

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.

SIGNATURE LARRY L CLARK
Signature, typed or printed name of registered agent and title if applicable.

Pres.
VP
(NOTE: Registered Agent signature required when reinstating)

4/10/01
3/30/01
DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐ (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	CLARK, HAROLD R	☒ Delete
NAME	3090 WINTERLAKE RD	
STREET ADDRESS	LAKELAND FL 33803	
CITY-ST-ZIP		
TITLE	CLARK, HAROLD JR.	☒ Delete
NAME	342 ECHO PINES WAY	
STREET ADDRESS	LAKELAND FL	
CITY-ST-ZIP		
TITLE	CLARK, LARRY	☒ Delete
NAME	6320 SUNNY WAY DRIVE	
STREET ADDRESS	LAKELAND FL	
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	PRESIDENT	☒ Change ☐ Addition
NAME	HAROLD R CLARK, JR	
STREET ADDRESS	342 ECHO PINES WAY	
CITY-ST-ZIP	LAKELAND, FL 33813	
TITLE	VICE PRESIDENT	☒ Change ☐ Addition
NAME	LARRY L CLARK	
STREET ADDRESS	6320 SUNNY WAY DR	
CITY-ST-ZIP	LAKELAND, FL 33813	
TITLE	DIRECTOR	☒ Change ☐ Addition
NAME	HAROLD R CLARK	
STREET ADDRESS	3090 WINTER LAKE RD	
CITY-ST-ZIP	LAKELAND, FL 33803	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. 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 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 11 or Block 12 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

3/30/01 863 662-1768
Date Daytime Phone #

CR20034 (10/00)