2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 24, 2004
Secretary of State

DOCUMENT# 497927

Entity Name: CHARLES M. CLARK, INC.

Current Principal Place of Business:

410 NORTH STREET
SUITE 162
LONGWOOD, FL 32750 US

New Principal Place of Business:

Current Mailing Address:

410 NORTH STREET
SUITE 162
LONGWOOD, FL 32750 US

New Mailing Address:

FEI Number: 59-1652056 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CLARK, CHARLES M. JR.
1330 AGUSTA INTERNATIONAL BLVD
WINTER SPRINGS, FL 32708

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: PD ( ) Delete
Name: CLARK, CHARLES M JR,
Address: 1330 AGUSTA NATIONAL BLVD
City-St-Zip: WINTER SPRINGS, FL 32708

Title: STD ( ) Delete
Name: HERNANDEZ, GRISELLE
Address: 1536 ROBLE LANE
City-St-Zip: DELTONA, FL 32750

Title: VD ( ) Delete
Name: AMANN, ROBERT C
Address: 3001 SURF DR
City-St-Zip: DELTONA, FL 31738

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: AVP ( ) Change (X) Addition
Name: CLARK, CHARLES M III
Address: 654 KENWICK CIRCLE
City-St-Zip: CASSELBERRY, FL 32707

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: GRISELLE HERNANDEZ ST 02/24/2004

Electronic Signature of Signing Officer or Director Date