

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 686790

Entity Name: O.C. UNLIMITED, INC.

FILED  
Apr 30, 2009  
Secretary of State

**Current Principal Place of Business:**

2329 AVE E  
RIVIERA BEACH, FL 33404

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 10635  
RIVIERA BCH, FL 33419

**New Mailing Address:**

FEI Number: 59-2029679

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CLARKE, OSMOND  
8885 AVOCADO BLVD.  
ROYAL PALM BEACH, FL 33412 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: P ( ) Delete  
Name: CLARKE, OSMOND  
Address: 8885 AVOCADO BLVD.  
City-St-Zip: ROYAL PALM BEACH, FL

Title: S ( ) Delete  
Name: CLARKE, LURLENE  
Address: 8885 AVOCADO BLVD.  
City-St-Zip: ROYAL PALM BEACH, FL 33412

Title: D ( ) Delete  
Name: CLARKE, IAN  
Address: 8885 AVOCADO BLVD  
City-St-Zip: ROYAL PALM BEACH, FL

Title: D ( ) Delete  
Name: CLARKE, SEDRICK  
Address: 8885 AVOCADO BLVD  
City-St-Zip: WEST PALM BEACH, FL 33412

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: OSMOND CLARKE

P

04/30/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date