

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 759031

FILED
Jan 20, 2008
Secretary of State

Entity Name: CLARK ROAD INDUSTRIAL CENTER OWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

6093 CLARK CENTER AVE
SARASOTA, FL 34238 US

New Principal Place of Business:

Current Mailing Address:

6093 CLARK CENTER AVE
SARASOTA, FL 34238 US

New Mailing Address:

P.O.BOX 19535
SARASOTA, FL 34276 US

FEI Number: 65-0409612

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BLATE, MARK
6093 CLARK CENTER AVE
SARASOTA, FL 34238 US

Name and Address of New Registered Agent:

SHARFF, MARK
6093 CLARK CENTER AVE
SARASOTA, FL 34238 US

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: M SHARFF

01/20/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: TD () Delete
Name: SHARFF, MARK
Address: 6093 CLARK CENTER AVE
City-St-Zip: SARASOTA, FL 34238

Title: VPD () Delete
Name: ALVIS, KIM
Address: 6093 CLARK CENTER AVE
City-St-Zip: SARASOTA, FL 34238

Title: PD () Delete
Name: BLATE, MARK
Address: 6244 CLARK CENTER AVE
City-St-Zip: SARASOTA, FL 34238

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD (X) Change () Addition
Name: SHARFF, MARK
Address: P.O.BOX 19535
City-St-Zip: SARASOTA, FL 34276

Title: VPD (X) Change () Addition
Name: ALVIS, KIM
Address: P.O.BOX 19535
City-St-Zip: SARASOTA, FL 27276

Title: PD (X) Change () Addition
Name: BLATE, MARK
Address: 6244 CLARK CENTER AVE UNIT#1
City-St-Zip: SARASOTA, FL 34238

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: M SHARFF

TD

01/20/2008

Electronic Signature of Signing Officer or Director

Date