2005 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

Secretary of State DOCUMENT #815447 02-28-2005 90236 016 ***150.00 CLARK HOLDING COMPANY Principal Place of Business Mailing Address 710 S OLIVE AVENUE P 0 BOX 2550 50020685 WEST PALM BEACH, FL 33402 WEST PALM BEACH, FL 33402 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite. Apt. #, etc. 02232005 CR2E034 (10/03) City & State City & State 4. FEI Number Applied For 59-0934890 Not Applicable Country Zip Country Zio \$8.75 Additional 5. Certificate of Status Desired _____ Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent CLARK, HARPER A.JR. Street Address (P.O. Box Number is Not Acceptable) 6601 PAMELA LANE WEST PALM BEACH, FL 33405 Zip Code City FL 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2005 Fee will be \$550.00 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. N Q PD 😘 ☐ Change ☐ Addition TITLE Delete TITLE CLARK, HARPER A.JR. NAME NAME STREET ADDRESS STREET ADDRESS 6601 PAMELA LANE WEST PALM BEACH, FL CITY-ST-ZIP CITY-ST-7P 3 ☐ Change TITLE ☐ Delete TITLE ☐ Addition CLARK, WAYNE T. NAME NAME STREET ADDRESS STREET ADDRESS 6601 PAMELA AVE. CITY-ST-ZIP CITY-ST-ZIP WEST PALM BCH., FL TITLE Nancie ☐ Delete TITLE - - Ghange Addition Nancie V Clark NAME CLARK, NANCY V NAME 6610 PAMELALANE 6601 Pamela Lane Pamela Lane STREET ADDRESS STREET ADDRESS WEST PALM BEACH, FL CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE 6601 Pamela Lane CLARK, HARPER R NAME 6610 PAMELA LANE 6601 Pamela Lane STREET ADDRESS STREET ADDRESS CITY-ST-ZIP WEST PALM BEACH, FL CITY-ST-ZIP Clark Gray D Gray CLARK, GARY TITLE ☐ Delete MLE □ Change ☐ Addition 6601 Pamela Lane NAME SGIO PAMELA LANE 6601 Pamela Lane NAME STREET ADDRESS STREET ADDRESS WEST PALM BEACH, FL CITY-ST-ZIP CITY-ST-ZIP ED TOUR SET TO SEE AND THE SEE TITLE ☐ Change ■ Addition TITLE WILLIAM □ Defete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 12. 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 of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

FIGER OR DIRECTOR

Date

Daytime Phone &

FILED

Feb 28, 2005 8:00 am