

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 840254

(7)

1. Corporation Name

C. & J. CLARK RETAIL, INC.



Principal Place of Business

520 S. BROAD ST.
KENNETT SQUARE PA 19348

Mailing Address

520 S. BROAD ST.
KENNETT SQUARE PA 19348

3. Date Incorporated or Qualified

03/21/1978

3a. Date of Last Report

05/01/1995

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

4. FEI Number

23-2051239

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0509, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent, if not applicable

Signature typed or printed name of registered agent, if not applicable

DATE

12. OFFICERS AND DIRECTORS

TITLE	TAS	<input type="checkbox"/> DELETE
NAME	BALSINGER, C. W.	
STREET ADDRESS	235 DOUGLASS DR.	
CITY-ST-ZIP	DOUGLASSVILLE PA	
TITLE	DP	<input type="checkbox"/> DELETE
NAME	N. G. FULLER	
STREET ADDRESS	101 MAROBROOKE WAY	
CITY-ST-ZIP	KENNETT SQUARE PA	
TITLE	DPFS	<input type="checkbox"/> DELETE
NAME	DEBORAH H	
STREET ADDRESS	520 S BROAD ST	
CITY-ST-ZIP	KENNETT SQUARE PA	
TITLE	CAS	<input type="checkbox"/> DELETE
NAME	K. J. MCCARTHY	
STREET ADDRESS	79 W. ESSEX AVE.	
CITY-ST-ZIP	LANSDOWNE PA	
TITLE	VP	<input type="checkbox"/> DELETE
NAME	GORDON, G.	
STREET ADDRESS	948 W. BROAD ST.	
CITY-ST-ZIP	WEST CHESTER PA	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	SALZANO, J.R.
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	GORDON, G.
5.3 STREET ADDRESS	520 S. BROAD STREET
5.4 CITY-ST-ZIP	KENNETT SQUARE, PA 19348
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

C. Wayne Balinger
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

TREASURER

4/18/96

(610) 444-6550

CR2E034 (12/95)