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FILED
May 13 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
 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**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
03/21/1978

4. FEI Number: **23-2051239**

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 owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

2. Principal Place of Business

21 **600 S. BROAD ST.**

22 Suite, Apt. #, etc.

23 City & State

24 Zip

25 Country

26 **600 S. BROAD ST.**

27 Suite, Apt. #, etc.

28 City & State

29 Zip

30 Country

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

85 Zip Code **FL**

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 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

12. OFFICERS AND DIRECTORS

TITLE	TAS	<input checked="" 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	17 HIGHGROFT WAY	
CITY-ST-ZIP	HOPKINTON MA	
TITLE	DPFS	<input type="checkbox"/> DELETE
NAME	SALZANO, J.R.	
STREET ADDRESS	520 S BROAD ST	
CITY-ST-ZIP	KENNET SQUARE PA	
TITLE	CAS	<input type="checkbox"/> DELETE
NAME	K. J. MCCARTHY	
STREET ADDRESS	79 W. ESSEX AVE.	
CITY-ST-ZIP	LANSDOWNE PA	
TITLE	D	<input type="checkbox"/> DELETE
NAME	INFANTINO, R.J.	
STREET ADDRESS	121 WINDSOR RD	
CITY-ST-ZIP	WABAN MA	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	PARKER, T	
1.3 STREET ADDRESS	600 S. BROAD STREET	
1.4 CITY-ST-ZIP	KENNETT SQUARE, PA 19348	
2.1 TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE	DIVIS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS	520 CHARLESBANK ROAD	
3.4 CITY-ST-ZIP	NEWTON, MA 02158	
4.1 TITLE	S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS	62 PAUL LANE	
4.4 CITY-ST-ZIP	GLEN MILLS, PA 19342	
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE	S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	DAVID P. GETTS	
6.3 STREET ADDRESS	455 SHADY LANE	
6.4 CITY-ST-ZIP	Huntingdon Valley, PA 19006	

14. 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 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 attachment with an address.

SIGNATURE *David P. Getts* 11/27/98

CR2E034 (10/97)