2006 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 28, 2006 8:00 am Secretary of State DOCUMENT # F02000006190 04-28-2006 90196 024 ***150.00 CLARK CINCINNATI, INCORPORATED Principal Place of Business Mailing Address 331 S.W. 57TH AVE. 101 CLARK BLVD OCALA, FL 34474-9346 MIDDLETOWN, OH 45044 2. Principal Place of Business 3. Mailing Address 38020 Pulp Suite, Apt. #, etc. Suite, Apt. #, etc. 04252006 Chg-P CR2E034 (11/05) City & State City & State 4. FEI Number Applied For Dade (31-1316947 Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Godfrey GODFREY, RAY Street Address (P.O. Box Number is No Acceptable) 331 SW 57TH AVENUE OCALA, FL 34474 Pulp 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** 9. Election Campaign Financing \$5.00 May Be FILE NOWI!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2006 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE ☐ Change ☐ Addition COURTNEY, WILLIAM NAME NAME 303 LINDEN RIDGE STREET ADDRESS STREET ADDRESS WYOMING, OH 45215 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition JANSON, MIKE NAME NAME STREET ADDRESS P.O. BOX 8712 STREET ADDRESS CITY-ST-ZIP WEST CHESTER, OH 450718712 CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition KEEBLER, DAVID NAME NAME STREET ADDRESS 7265 ST. IVES STREET ADDRESS CITY-ST-ZIP WEST CHESTER, OH 45069 CITY-ST-ZIF TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF TITLE ☐ Delete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIE TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address.

CEO CC

FILED

William Courtney

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: