

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

FILED
Mar 07 1997 8:00am
Secretary of State

DOCUMENT # F43195

(9)

1. Corporation Name

CLOBUS, MCLEMORE & DUKE, INC.

Principal Place of Business

2000 E. OAKLAND PARK BLVD.
FT. LAUDERDALE FL 33306-1120
US

Mailing Address

2000 E. OAKLAND PARK BLVD.
FT. LAUDERDALE FL 33306-1120
US

[Moving 4/'97]

2. Principal Place of Business

21 4101 Ravenswood Road

22 Suite, Apt. #, etc.
226

23 City & State
Ft Lauderdale, FL

24 Zip
33312-5352

25 Country
Broward

2a. Mailing Address

26 4101 Ravenswood Road

27 Suite, Apt. #, etc.
226

28 City & State
Ft Lauderdale, FL

29 Zip
33312-5352

30 Country
Broward

3. Date Incorporated or Qualified

09/02/1981

3a. Date of Last Report

05/01/1996

4. FEI Number

59-2131255

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

CLOBUS, ROBERT
2000 E OAKLAND PRK BLVD
FT. LAUDERDALE FL 33306

[Moving 4/97]

10. Name and Address of New Registered Agent

81 Name

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

4101 Ravenswood Road, Suite 226

83

84 Ft Lauderdale, FL

FL

85 Zip Code
33312-5352

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when re-stating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE

NAME CLOBUS, ROBERT
STREET ADDRESS 2000 E OAKLAND PRK BLVD
CITY-ST-ZIP FT LAUDERDALE FL

TITLE EVP ☐ DELETE

NAME MCLEMORE, SCOTT M.
STREET ADDRESS 2000 E OAKLAND PRK BLVD
CITY-ST-ZIP FT. LAUDERDALE FL

TITLE SVP ☐ DELETE

NAME DUKE, WALTER B III
STREET ADDRESS 2000 EAST OAKLAND PARK BLVD.
CITY-ST-ZIP FT. LAUDERDALE FL

TITLE ☐ DELETE

NAME
STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME
1.3 STREET ADDRESS 4101 Ravenswood Road #226
1.4 CITY-ST-ZIP 33312-5352

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS 4101 Ravenswood Road #226
2.4 CITY-ST-ZIP 33312-5352

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS 4101 Ravenswood Road #226
3.4 CITY-ST-ZIP 33312-5352

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ 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 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 an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Robert D. Clobus

3/3/97

954-566-2511

Date

Daytime Phone #

CR2E034 (9/96)