

**2001 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Jul 24, 2001 8:00 am**  
**Secretary of State**

012 345 AT

**DOCUMENT # F97000001522**



1. Entity Name  
**CLARK CRYSTAL RIVER AUTO REPAIR INC.**

07-24-2001 90017 012 \*\*\*150.00

Principal Place of Business  
**ATT: JOHN E. CLARK**  
**10 DELLA CT.**  
**BEVERLY HILLS FL 34465**

Mailing Address  
**ATT: JOHN E. CLARK**  
**10 DELLA CT.**  
**BEVERLY HILLS FL 34465**



2. Principal Place of Business  
**3255 N. CARL G. ROSE HWY.**

3. Mailing Address  
 Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State  
**HERNANDO FL.**

4. FEI Number **NOT APPLICABLE** Applied For  Not Applicable

Zip **34442** Country **CITRUS**

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
<b>CLARK, JOHN E</b> <b>800 SE HWY</b> <b>CRYSTAL RIVER FL 34429</b>		Name <b>JOHN E. CLARK</b> Street Address (P.O. Box Number is Not Acceptable) <b>10 DELLA CT.</b> <del>3255 N. CARL G. ROSE HWY.</del> City <b>BEVERLY HILLS FL</b> Zip Code <b>34465</b>	

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.

SIGNATURE *John E. Clark* (JOHN E. CLARK) DATE **7-18-01**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.

**FILE NOW!!! FEE IS \$550.00**  
**After September 12, 2001 Fee will be \$750.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution.  **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PCD</b> <b>CLARK, JOHN E</b> <b>10 DELLA CT</b> <b>BEVERLY HILLS FL</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VSD</b> <b>CLARK, LILLIAN</b> <b>10 DELLA CT</b> <b>BEVERLY HILL FL 34465</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. 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 or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *John E. Clark* **REQUIRED** DATE: **7-18-01**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

WORK # **352 637 2678**  
 HOME # **352 637 2990**

CR2E034 (5/01)

Attachment Doc # F97000001522  
CLARK CRYSTAL RIVER AUTO REPAIR INC. C 0073939

C/O JOHN E. CLARK  
10 DELLA CT.  
BEVERLY HILLS FL. 34465  
CITURS COUNTRY

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Phone SHOP # (352) 637-2678 Home# (352) 746-7920  
Email clarks@hutter.net

July 19, 2001

To The Florida Department Of State  
Division Of Corporations

To whom it may concern,

On Document # F97000001522

I did not recive the frist notice you sent. And information on the second notice is wrong. I called your office on 7/19/01. And was told to make correction on the form and send a check for \$150.00 .

Sincerely, John E. Clark (PCD)

