SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.) **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 1996 DIVISION OF CORPORATIONS DOCUMENT # J17034 (6)EDDIE CLARK'S PIT, INC. Principal Place of Business Mailing Address S LEE E. CLARK, SR. % LEE E. CLARK, SR. 5357 LAKE SPARLING RD 5357 LAKE SPARLING RD ORLANDO FL 32810 ORLANDO FL 32810 3. Date incorporated or Qual fied 3a. Date of Last Report 05/27/1986 04/11/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 59-2679246 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired 27 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zıp Country Zın Country 8. This corporation has liability for intangible tax under s. 199 032, 24 25 29 30 Florida Statutes Yes No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name CLARK, LEE E., SR. 5357 LAKE SPARLING RD 82 Street Address (P.O. Box Number is Not Acceptable) ORLANDO FL 32810 В3 84 City 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. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. **SIGNATURE** Signature itypest or protest name of regestered agent and to elif appearable (NOTE Registered Agent's greature received whererensiating) (NATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (36/8)THILE DELETE 1.1 TITLE CLARK, LEE E., SR. NAME 1.2 NAME E034 5357 LAKE SPARLING RD STREET ADDRESS 1.3 STREET ADDRESS ORLANDO FL CITY-ST-ZIP 1.4 CITY - ST - ZIP TITLE DELETE 2.1 THILE Change Addition CLARK, DOROTHY L. NAME 2.2 NAME 5357 LAKE SPARLING RD STREET ADDRESS 2.3 STREET ADDRESS ORLANDO FL CITY-ST-ZIP 2 4 CITY - ST - ZIP TITLE DELETE 3.1 THILE ___ Change ___ Addition 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY - ST - ZIP 3.4 City - ST-7/P TITLE DELETE 41 TITLE Change Addition NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 44 CITY - ST-ZIP TITLE DELETE 5 1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5 4 CITY - ST-ZIP TITLE DELETE 6111116 Change Addition NAME 6.2 NAME STREET ADDRESS CITY - ST - ZIP 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address

Clark Sr

OFFICER OR DIRECTOR

Date

Dartime Phone #

SIGNATURE: V