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Apr 29 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # J40985 (0)

1. Corporation Name
C.L. CLARK, BUILDING CONTRACTOR, INC.



Principal Place of Business
C/O CLARENCE CLARK
805 LAKESIDE HARBOR
BOYNTON BEACH FL 33435

Mailing Address
C/O CLARENCE CLARK
805 LAKESIDE HARBOR
BOYNTON BEACH FL 33435-2403

| | |
|--|--|
| 3. Date Incorporated or Qualified 11/05/1986 | 3a. Date of Last Report 04/05/1996 |
| 4. FEI Number 59-2741054 | Applied For <input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |
| 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> | \$5.00 May Be Added to Fees |
| 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | |

| | |
|---|--|
| 2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country | 2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country |
|---|--|

9. Name and Address of Current Registered Agent
CLARK, CLARENCE
805 LAKESIDE HARBOR
BOYNTON BEACH FL 33435

| | |
|--|----------------------|
| 10. Name and Address of New Registered Agent | |
| 81 Name DANIEL G. CLARK | 85 Zip Code 33435 |
| 82 Street Address (P.O. Box Number is Not Acceptable) 605 LAKESIDE HARBOR | |
| 83 City BOYNTON BCH, FLA. | |
| 84 City FL | 85 Zip Code 33435 |

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: *Daniel G. Clark* DANIEL G. CLARK 4/22/97
Signature typed or printed name of registered agent and title, if applicable. (NOTE: Registered Agent signature required when reinstating)

| 12. OFFICERS AND DIRECTORS | |
|--|---|
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | DP CLARK, CLARENCE L. 805 LAKESIDE HARBOR BOYNTON BEACH FL <input type="checkbox"/> DELETE |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | VS CLARK, MARK R 805 LAKESIDE HARBOR BOYNTON BEACH FL <input type="checkbox"/> DELETE |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | <input type="checkbox"/> DELETE |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | <input type="checkbox"/> DELETE |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | <input type="checkbox"/> DELETE |

| 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|--|--|
| 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP | DP DANIEL G. CLARK <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition DANIEL G. CLARK 605 LAKESIDE HARBOR BOYNTON BCH, FLA. 33435 |
| 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |

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: *Daniel G. Clark* DANIEL G. CLARK 4/22/97 941-465-8137
Signature and typed or printed name of signing officer or director Date Daytime Phone #

CR2E034 (9/96)