FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
SANDRA B. MORTHAM
SECRETARY OF STATE
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 MAY -1 AM 8:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # J43657 (2)

1. Corporate Name
A.C.L.F. (CLARK), INC.

Principal Place of Business
1645 PALM BEACH LAKES BLVD.
SUITE 400
WEST PALM BEACH FL 33401

Mailing Address
1645 PALM BEACH LAKES BLVD.
SUITE 400
WEST PALM BEACH FL 33401

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 11/19/1986
3a. Date of Last Report: 05/01/1994

2. Principal Place of Business — 21
2a. Mailing Address — 26
Suite Apt # etc — 22
Suite Apt # etc — 27
City & State — 23
City & State — 28
Zip — 24
County — 25
Zip — 29
County — 30

4. FEI Number: 59-2829987 — 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 elected to be governed by Section 607.1908 Florida Statutes: X Yes ☐ No

9. Name and Address of Current Registered Agent
SCHWENCKE, KERRY R.
1645 PALM BEACH LAKES BLVD.
SUITE 720
WEST PALM BEACH FL 33401

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City — FL — 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 its 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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PVD	TITLE	☐ Change ☐ Addition
NAME	HAMILTON, WILLIAM	1/NAME	
STREET ADDRESS	1645 PALM BEACH LAKES BLVD., #400	1/STREET ADDRESS	
CITY, ST, ZIP	WEST PALM BEACH FL 33401	1/CITY, ST, ZIP	
TITLE	STD	2/TITLE	☐ Change ☐ Addition
NAME	SANTANGELO, FRANCIS R.	2/NAME	
STREET ADDRESS	1645 PALM BEACH LAKES BLVD., #400	2/STREET ADDRESS	
CITY, ST, ZIP	WEST PALM BEACH FL 33401	2/CITY, ST, ZIP	
TITLE		3/TITLE	☐ Change ☐ Addition
NAME		3/NAME	
STREET ADDRESS		3/STREET ADDRESS	
CITY, ST, ZIP		3/CITY, ST, ZIP	
TITLE		4/TITLE	☐ Change ☐ Addition
NAME		4/NAME	
STREET ADDRESS		4/STREET ADDRESS	
CITY, ST, ZIP		4/CITY, ST, ZIP	
TITLE		5/TITLE	☐ Change ☐ Addition
NAME		5/NAME	
STREET ADDRESS		5/STREET ADDRESS	
CITY, ST, ZIP		5/CITY, ST, ZIP	
TITLE		6/TITLE	☐ Change ☐ Addition
NAME		6/NAME	
STREET ADDRESS		6/STREET ADDRESS	
CITY, ST, ZIP		6/CITY, ST, ZIP	

14. I hereby certify that the information supplied with this report is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information with respect to the 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 of this report or on an attachment with an address.

SIGNATURE: William B. Hamilton — William B Hamilton — 5/1/95 — (407)688-9555
SIGNATURE AND TYPED OR PRINTED NAME OF DIRECTOR OR OFFICER — Date — Daytime Phone #

0242005 CP