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 APR 25 AM 10:02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **K52874** **(0)**

1. Corporation Name

JAMES E. CLARK, INC.

Principal Place of Business	Mailing Address
C/O VICTORIA E. MACINTOSH 5263 CENTRAL AVENUE ST. PETERSBURG FL 33710	C/O VICTORIA E. MACINTOSH 5263 CENTRAL AVENUE ST. PETERSBURG FL 33710

DO NOT WRITE IN THIS SPACE

2. ~~C/O JAMES E. CLARK, INC.~~

21 ~~C/O KAREN A. CLARK~~ — Suite, Apt #, etc: 22

23 City & State: ~~ST~~

24 Zip: 25 Country:

2a. Mailing Address

26 ~~3251 MORRIS ST. NO.~~ — Suite, Apt #, etc: 27

28 City & State: ~~ST. PETERSBURG, FL.~~

29 Zip: ~~33713~~ 30 Country: ~~FLORIDA~~

3. Date Incorporated or Qualified: **12/21/1988**

3a. Date of Last Report: **04/06/1994**

4. FEI Number: **59-2926727** ☐ 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

MACINTOSH, VICTORIA E.
5263 CENTRAL AVENUE
ST. PETERSBURG FL 33710

10. Name and Address of New Registered Agent

81 Name: KAREN A. CLARK

82 Street Address (P.O. Box Number is Not Acceptable): 3251 MORRIS ST. NO.

83

84 City: ST. PETERSBURG FL 85 Zip Code: 33713

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: KAREN A. CLARK Karen A. Clark 4/13/95
(Signature, typed or printed name of registered agent and title if agent is a corporation) (NOTE: Registered Agent signature required when reinstating) (DATE)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	DP	11 TITLE	CLARK, JAMES V. V.P	☒ Change ☐ Addition
NAME	CLARK, JAMES JOSEPH	12 NAME		
STREET ADDRESS	1901 41ST ST. NORTH	13 STREET ADDRESS		
CITY ST ZIP	ST. PETERSBURG FL	14 CITY ST ZIP		
TITLE	DVP	21 TITLE	P	☒ Change ☐ Addition
NAME	CLARK, KAREN A.	22 NAME	KAREN A. CLARK	
STREET ADDRESS	1901-41ST ST. NORTH	23 STREET ADDRESS		
CITY ST ZIP	ST. PETERSBURG FL	24 CITY ST ZIP		
TITLE		31 TITLE		☐ Change ☐ Addition
NAME		32 NAME		
STREET ADDRESS		33 STREET ADDRESS		
CITY ST ZIP		34 CITY ST ZIP		
TITLE		41 TITLE		☐ Change ☐ Addition
NAME		42 NAME		
STREET ADDRESS		43 STREET ADDRESS		
CITY ST ZIP		44 CITY ST ZIP		
TITLE		51 TITLE		☐ Change ☐ Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY ST ZIP		54 CITY ST ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY ST ZIP		64 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)(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: Karen A. Clark - Pres. 4/13/95 813-822-3417
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (Date) (Daytime Phone #)

030041 CP