

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000001593

Entity Name: ACCLARK1 LLC

FILED
Mar 03, 2006
Secretary of State

Current Principal Place of Business:

630 BREVARD AVENUE
#207
COCOA, FL 32922 US

New Principal Place of Business:

37 DERBY STREET
COCOA, FL 32922 US

Current Mailing Address:

630 BREVARD AVENUE
#207
COCOA, FL 32922 US

New Mailing Address:

37 DERBY STREET
COCOA, FL 32922 US

FEI Number: 20-2136254

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CLARK, AARON C
630 BREVARD AVENUE
#207
COCOA, FL 32922 US

Name and Address of New Registered Agent:

CLARK, AARON C
37 DERBY STREET
COCOA, FL 32922 US

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:

03/03/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: CLARK, AARON C
Address: 630 BREVARD AVENUE, #207
City-St-Zip: COCOA, FL 32922 US

Title: MGRM () Delete
Name: GILLASPY, GREG
Address: 630 BREVARD AVENUE, #207
City-St-Zip: COCOA, FL 32922 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: CLARK, AARON C
Address: 37 DERBY STREET
City-St-Zip: COCOA, FL 32922 US

Title: MGRM (X) Change () Addition
Name: GILLASPY, GREG
Address: 37 DERBY STREET
City-St-Zip: COCOA, FL 32922 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: AARON C CLARK

MGRM

03/03/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date