2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L06000047243

1. Entity Name

DAVID M. CLARK INVESTMENTS, LLC



FILED Jan 31, 2008 08:00 AN Secretary of State

Principal Place of Business

703 KNOLLWOOD DRIVE LARGO, FL 33770

Mailing Address

703 KNOLLWOOD DRIVE LARGO, FL 33770



DO NOT WRITE IN THIS SPACE

01282008 No Chg-LLC CR2E083 (12/07)

4. FEI Number		Applied For
NOT APPLICABLE	 [,	Not Applicable
5. Certificate of Status Desired	\$5.00	Additional

6. Name and Address of Current Registered Agent

CLARK, DAVID M 703 KNOLLWOOD DRIVE LARGO, FL 33770

SIGNATURE:

SIGNATURE AND TYP

DO NOT WRITE IN THIS SPACE

the obligat	named entity submits this statement for the purpose of changing its registere ions of registered agent.	ad office or registered agent, or both, in the State of Florida. I am familiar with, and accept		
SIGNATURE_	Signature, typed or printed name of registered agent and title if applicable (NOTE: Registere	d Agent signature required when reinstating) DATE		
	NOWIII FEE IS \$138.75 1, 2008 Fee will be \$538.75			
9.	MANAGING MEMBERS/MANAGERS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM CLARK, DAVID M 703 KNOLLWOOD DRIVE LARGO, FL 33770	U00000887106		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		02/06/08-80069-009 138.75		
TITLE NAME STREET ADDRESS CHY-ST-ZIP		DO NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE TABLE TO STREET ADDRESS CITY-SI-ZIP		A STATE OF THE PROPERTY OF THE		
11. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that physignature shall have the same legal effect as it made under oath; that I am a managing member or manager of the limited liability company or the received or trustee employered to execute this report as regained by Chapter 608. Florida Statutes.				