

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000074139

FILED
Jan 03, 2008
Secretary of State

Entity Name: ALAN J. CLARK HOLDINGS, LLC

Current Principal Place of Business:

7030 NW HIGHWAY 225A
OCALA, FL 34482

New Principal Place of Business:

7030 NW HIGHWAY 225A
OCALA, FL 34482 US

Current Mailing Address:

7030 NW HIGHWAY 225A
OCALA, FL 34482

New Mailing Address:

7030 NW HIGHWAY 225A
OCALA, FL 34482 US

FEI Number: 26-0549937

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ZITZKA, JOSEPH W
450 SOUTH ORANGE AVENUE, STE. 250
ORLANDO, FL 32801 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM () Change (X) Addition
Name: CLARK, ALAN J
Address: 7030 NW HWY 225A
City-St-Zip: OCALA, FL 344827631 US

Title: MGRM () Change (X) Addition
Name: ZITZKA, KYLENE L
Address: 878 RIVER BOAT CIRCLE
City-St-Zip: ORLANDO, FL 32828 US

Title: MGRM () Change (X) Addition
Name: CLARK, CORINNE K
Address: 6447 ENGRAM RD.
City-St-Zip: NEW SMYRNA BEACH, FL 32169

I hereby certify that the information supplied with this filing does not qualify 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: ALAN J. CLARK

MGRM

01/03/2008

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