

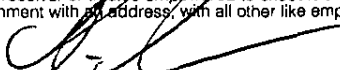


FILED
Apr 18, 2008 08:00 A]
Secretary of State

DOCUMENT # M68028			
1. Entity Name CLARKE COMPUTER CORPORATION			
Principal Place of Business C/O PAT SHERRILL 825 SE 47TH TERRACE CAPE CORAL, FL 33904		Mailing Address C/O PAT SHERRILL 825 SE 47TH TERRACE CAPE CORAL, FL 33904	
DO NOT WRITE IN THIS SPACE			
		04042008 No Chg-P CR2E034 (11/05)	
		4. FEI Number NOT APPLICABLE Applied For Not Applicable	
		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SHERRILL, PATRICK M 825 SE 47TH TERRACE CAPE CORAL, FL 33904		DO NOT WRITE IN THIS SPACE	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees	
		DATE 05/05/08-80013-020 150.00	
10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		P SHERRILL, PATRICK 825 SE 47TH TERRACE CAPE CORAL, FL 33904	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		ST SHAW, CLAUDIA 825 SE 47TH TERRACE CAPE CORAL, FL 33904	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
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TITLE NAME STREET ADDRESS CITY-ST-ZIP			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: 		PATRICK SHERRILL 4/14/08 239 945 0851	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date Daytime Phone #</small>	