

**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

**FILED
Jan 22, 2008 8:00 am
Secretary of State**

01-22-2008 90042 042 ****61.25

DOCUMENT # N07000008581

1. Entity Name
CLARK STATION CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business
5763 ROSIN WAY, STE. 1
SARASOTA, FL 34233

Mailing Address
5763 ROSIN WAY, STE. 1
SARASOTA, FL 34233

2. Principal Place of Business No P.O. Box #
5130 Station Way
Suite, Apt. #, etc.

3. Mailing Address
5130 Station Way
Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

SHAW, TIMOTHY S. ESQ.
50 CENTRAL AVE., STE. 700
KIRK PINKERTON, P.A.
SARASOTA, FL 34236

7. Name and Address of New Registered Agent

Name **Barry D. Edwards**
Street Address (P.O. Box Number is Not Acceptable)
5130 Station way
Sarasota

City

FL Zip Code **34233**

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

Barry D. Edwards, DP

1/14/2008

**Filing Fee is \$61.25
Due by May 1, 2008**

**9. Election Campaign Financing
Trust Fund Contribution.**

**\$5.00 May Be
Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE DP
NAME EDWARDS, BARRY D.
STREET ADDRESS 5763 ROSIN WAY, STE. 1
CITY-ST-ZIP SARASOTA, FL 34233

Delete

TITLE DST
NAME PATANE, JOSEPH M.
STREET ADDRESS 5763 ROSIN WAY, STE. 1
CITY-ST-ZIP SARASOTA, FL 34233

Delete

TITLE D
NAME BURKE, THOMAS M.
STREET ADDRESS 5753 ROSIN WAY, STE. 1
CITY-ST-ZIP SARASOTA, FL 34233

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition

5130 Station Way

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition

5130 Station Way

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition

5130 Station Way

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition

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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all power like empowered.

SIGNATURE:

Barry D. Edwards, DP 1/14/2008 941921-1023

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #