

**2007 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 11, 2007 8:00 am**  
**Secretary of State**

01-11-2007 90060 048 \*\*\*\*61.25

**DOCUMENT # N46638**

1. Entity Name  
**THE GEORGE C. CLARK FOUNDATION, INC.**



Principal Place of Business  
**13770 58TH ST N  
SUITE 304  
CLEARWATER, FL 33760**

Mailing Address  
**13770 58TH ST N. STE 304  
CLEARWATER, FL 33760**

**40001877**



01082007 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number  
**59-3099865**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional  
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MACY, STEPHEN A CPA  
13770 58TH ST N. STE 304  
CLEARWATER, FL 33760**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25  
Due by May 1, 2007**

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Delete  
NAME CLARK, DAVID  
STREET ADDRESS 703 KNOLLWOOD DR  
CITY-ST-ZIP LARGO, FL 33770

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE T ☐ Delete  
NAME CLARK, NANCY R.  
STREET ADDRESS 220 GREENVILLE AVE N.  
CITY-ST-ZIP SAINT PETERSBURG, FL 33703

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D ☐ Delete  
NAME RIDDLE, LYNDASAY  
STREET ADDRESS 311 SHIRLEY DR  
CITY-ST-ZIP LARGO, FL 33770

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE VD ☐ Delete  
NAME CLARK, GEORGE C JR  
STREET ADDRESS 1536 SILANDRO DR  
CITY-ST-ZIP LAS VEGAS, NV 89117

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS 9286 MORANT BAY AVE  
CITY-ST-ZIP LAS VEGAS, NV 89148

TITLE D ☐ Delete  
NAME PESCHEK, DAWN DAWN  
STREET ADDRESS 15724 207TH PL SE  
CITY-ST-ZIP RENTON, WA 98059

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D ☐ Delete  
NAME SKALSKI, JOSEPH C  
STREET ADDRESS 945 ROBERTS LANDING COVE  
CITY-ST-ZIP ATLANTA, GA 30350

TITLE ☐ Change ☐ Addition  
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 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 other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*David M Clark*  
President

Date

Daytime Phone #

(727) 793-8448

DAVID CLARK