

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 02, 2005 8:00 am
Secretary of State

02-02-2005 90048 031 ****61.25

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1. Entity Name

THE CLARK FOUNDATION, INC.



Principal Place of Business

20 PAGET COURT
VERO BEACH FL 32963

Mailing Address

20 PAGET COURT
VERO BEACH FL 32963

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0720830

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

NEIMARK, CORT A
800 CORPORATE DR STE 400
FORT LAUDERDALE FL 33334

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

**FILE NOW: FEE IS \$61.25
Due By May 1, 2005**

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 **P** ☐ Delete
NAME **ATTARIAN, CLAUDIA C**
STREET ADDRESS **3 JUPITER HILLS CT**
CITY-ST-ZIP **DURHAM NC 27712**

TITLE **VP** ☐ Delete
NAME **CLARK, MARLO W**
STREET ADDRESS **20 PAGET COURT**
CITY-ST-ZIP **VERO BEACH FL 32963**

TITLE **SVT** ☐ Delete
NAME **CLARK, JEFFERY T**
STREET ADDRESS **1113 MANNING DRIVE**
CITY-ST-ZIP **EL DORADO HILLS CA 95762**

TITLE **D** ☐ Delete
NAME **CLARK, RICHARD S**
STREET ADDRESS **5306 LEGACY DRIVE**
CITY-ST-ZIP **LOWELL AR 72745**

TITLE **D** ☐ Delete
NAME **CLARK, WILLIS W III**
STREET ADDRESS **248 GULLANE DR**
CITY-ST-ZIP **CHARLESTON SC 29414**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE **VP** ☒ Change ☐ Addition
NAME **FREDEEN, MARLO W**
STREET ADDRESS **656 DATE PALM ROAD**
CITY-ST-ZIP **VERO BEACH, FL 32963**

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

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

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

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 exemption stated in Section 119.07(3)(i), 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:

Claudia C Attarian

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-24-05

Date

919-471-9779

Daytime Phone #