2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000075670

FILED Jul 13, 2005 Secretary of State

Entity Name: STEVE CLARK, INC. **Current Principal Place of Business: New Principal Place of Business:** 2840 NW FEDERAL HIGHWAY STUART, FL 34994 **Current Mailing Address: New Mailing Address:** 2840 NW FEDERAL HIGHWAY STUART, FL 34994 FEI Number: 65-1125640 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CLARK, STEVE 364 NW BAYONET PL JENSEN BEACH, FL 34957 US 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 In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: DPST () Delete Title: (X) Change () Addition CLARK, STEVE CLARK, STEVE Name: Name: 3752 SE OCEAN BLVD. 364 NW BAYONET PL Address: Address: City-St-Zip: STUART, FL 34996 City-St-Zip: JENSEN BEACH, FL 34957 VΡ Title: Title: () Delete () Change () Addition Name: CLARK, WENDALYN Name: 364 NW BAYONET PLACE Address: Address: JENSEN BEACH, FL 34957 City-St-Zip: City-St-Zip: Title: Title: () Delete () Change (X) Addition ANDREA, FAZENBAKER L Name: Name: 352 NW BAYONET PLACE Address Address: City-St-Zip: City-St-Zip: JENSEN BEACH, FL 34957 Title: () Delete Title: () Change (X) Addition SCOTT, CLARK T Name: Name: Address: Address: 352 NW BAYONET PLACE City-St-Zip: City-St-Zip: JENSEN BEACH, FL 34957 Title: Title: () Delete () Change (X) Addition Name: Name: TAMARA, ALEXANDER Address: Address: 523 SOUTH BROADVIEW City-St-Zip: City-St-Zip: SPRINGFIELD, MO 65802

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

VΡ SIGNATURE: WENDALYN CLARK 07/13/2005