

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P02000052919

FILED  
Apr 01, 2003  
Secretary of State

Entity Name: CLK INSURANCE SERVICES, INC.

## Current Principal Place of Business:

6954 OAK BRIDGE LN  
LAKE WORTH, FL 33467

## New Principal Place of Business:

## Current Mailing Address:

6954 OAK BRIDGE LN  
LAKE WORTH, FL 33467

## New Mailing Address:

FEI Number: 01-0626444

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BROWN, ROBERT S  
105 S NARCISSUS AVE STE 704  
W PALM BCH, FL 33401 US

## Name and Address of New Registered Agent:

MACHIELA, STEVEN H CPA  
6801 LAKE WORTH RD SUITE 124  
LAKE WORTH, FL 33467 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: STEVEN MACHIELA CPA

04/01/2003

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: KENNEDY, CHRISTINA L  
Address: 6954 OAK BRIDGE LN  
City-St-Zip: LAKE WORTH, FL 33467

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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.

SIGNATURE: CHRISTINA L KENNEDY

MISS

04/01/2003

Electronic Signature of Signing Officer or Director

Date