

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000017050

Entity Name: CLOKE ENTERPRISES, INC.

FILED
Apr 26, 2006
Secretary of State

Current Principal Place of Business:

200 SUNRISE ROAD
DAVENPORT, FL 33837

New Principal Place of Business:

200 SUNRISE ROAD
DAVENPORT, FL 33837 US

Current Mailing Address:

200 SUNRISE ROAD
DAVENPORT, FL 33837

New Mailing Address:

200 SUNRISE ROAD
DAVENPORT, FL 33837 US

FEI Number: 52-2458551

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LAVIGNE COTON & ASSOCIATES PA
7087 GRAND NATIONAL DR SUITE 100
ORLANDO, FL 32819 US

Name and Address of New Registered Agent:

LAVIGNE, JAMES R ESQ.
7087 GRAND NATIONAL DR
SUITE 100
ORLANDO, FL 32819 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: JAMES R. LAVIGNE

04/26/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: CLOKE, DAVID R
Address: 13 LAUREL CLOSE
City-St-Zip: FOLKSTONE KENT CT20 3PP, L

Title: D () Delete
Name: CLOKE, MARION JOY
Address: 13 LAUREL CLOSE
City-St-Zip: FOLKSTONE KENT CT20 3PP, L

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: CLOKE, DAVID R
Address: 200 SUNRISE ROAD
City-St-Zip: DAVENPORT, FL 33837 US

Title: D (X) Change () Addition
Name: CLOKE, MARION JOY
Address: 200 SUNRISE ROAD
City-St-Zip: DAVENPORT, FL 33827 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: MARION CLOKE

D

04/26/2006

Electronic Signature of Signing Officer or Director

Date