

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000000803 (5)

1. Corporation Name

CLARKE ICE CREAM COMPANY

Principal Place of Business

Mailing Address

2550 KIRBY AVENUE, NE
SUITE 206
PALM BAY FL 32905
US

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SUITE 206
PALM BAY FL 32905
US

FILED

97 SEP 11 PM 4:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 01/06/1993	3a. Date of Last Report 05/01/1996
4. FEI Number 06-1361992	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business

2a. Mailing Address

21 2835 KIRBY NE

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 SUITE 107

27

City & State

City & State

23 PALM BAY

28

Zip

Zip

24 32905

Country

Country

25 USA

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

NOTE: Registered Agent signature required when reinstating.

8/13/97
DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DCOB PRESIDENT ☐ DELETE
NAME CLARKE, HENRY D + TRAS.
STREET ADDRESS 271 LLWYD'S LN
CITY-ST-ZIP VERO BCH FL

1.1 TITLE MARVIN GREEN ☐ Change ☒ Addition
1.2 NAME TUCKERSTOWN DIRECTOR
1.3 STREET ADDRESS BERMUDA NA
1.4 CITY-ST-ZIP

TITLE DVPT ☒ DELETE
NAME CLARKE, MICHAEL W.
STREET ADDRESS 975 PINE WALK CT. NE
CITY-ST-ZIP PALM BAY FL

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS 600002293496--C
2.4 CITY-ST-ZIP -09/15/97--01134--011

TITLE DS ☐ DELETE
NAME HARRIS, WILMOT L.JR.
STREET ADDRESS 170 MASON ST
CITY-ST-ZIP GREENWICH CT

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE ART SEC ☐ DELETE
NAME DONNA L. CLARKE
STREET ADDRESS 271 LLWYD'S LN
CITY-ST-ZIP VERO BEACH FL

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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 annual report or supplemental annual 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE *[Signature]* 8/13/97 H07957.9073

CR2E034 (4/97)