FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham ,

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name

P95000006877 (1)

R.O. CLARK, INC.

Principal Place of Business Mailing Address

FILED Mar 11 1998 8:00am Secretary of State



3353 5TH AVENUE 8. 8T. PETERSBURG FL 33712		P.O. BOX 11898 ST. PETERSBURG FL 33733-1898		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/25/1995		
	ace of Business	2a. Mailing Address		4. FEI Number 69-330434	Applied For Not Applicable	
Suite, Apt. #, etc		Suite, Apt. #, etc.			CQ 75 Additional	
22		27		5. Certificate of Status Desired	Fee Required	
City & State		City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip 24	Country 25	Zip 29	Countr 30	y 	This corporation owes or has paid Personal Property Tax due June 3	30. 🗌 Yes 🗎 No
	g. Name and Address of Current	Registered Agent		T	10. Name and Address of New Reg	istered Agent
HALL, DONALD R			61	Name		
	50 U.S. HWY. 19 N.		82	Street Add	dress (P.O. Box Number is Not Acceptable	3)
	ITE 402 Earwater Fl. 33761		83			
, ou	ANNA LITTE SS/01		84	City		FL 85 Zip Code
	Signature typed or punited name of registimed agen	(NO) oldesslepte to slitt brus	11E: Registered Ac		rporation submits this statement for the pu ation's board of directors. I hereby accept uired when reinstating)	DATE
12.	OFFICENS AND	DINECTORS	13.		ADDITIONS/CHANGES TO OFFICE	
THILE	PD	☐ DELETE	1.1 TITLE			Change Addition
NAME	CLARK, RICHARD O		1.2 NAME			
STREET ADDRESS	3353 5TH AVENUE S.			T ADDRESS		
CITY-ST-ZIP	ST. PETERSBURG FL 33712	T DELETE	1.4 CITY-	ŞT-ZIP		Change Addition
TITLE	40		2.1 TITLE			C Charles D Addition
NAME	LAWRENCE, CARL 3353 5TH AVENUE S.		2.2 NAME	T ADDRESS		
STREET ADDRESS	ST. PETERSBURG FL 33712		2.4 CITY			<u> </u>
CITY-ST-ZIP TITLE	STD	DELETE	3.1 TITLE	-31-211		Change Addition
NAME	CLARK, OLIVER		3.2 NAME	1		_
STREET ADDRESS	3353 5TH AVENUE S.			T ADDRESS		
CITY-ST-ZIP	ST. PETERSBURG FL 33712		3.4. CITY	-ST-ZIP		•
TITLE		DELFTE	4.1 TITLE			Change Addition
NAME			4. 2 NAM	E		
STREET ADDRESS			4.3 STREE	T ADDRESS		
CITY-ST-ZIP			4.4 CITY-	ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE			Change Addition
NAME			5.2 NAME			
STREET ADDRESS			5 3 STREI	T ADDRESS		
CITY-ST-ZIP			5 4 CITY	ST-ZIP		
TITLE		DELETE	6.1 TITLE			Change Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STRE	ET ADDRESS		
CITY OT 71D			64 CITY-	ST-7IP		

14. Thereby 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:

Persona Or Cem

3/5/98

354-1225