

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # P95000095584 (5)

1. Corporation Name

CLARK ROAD INVESTMENTS, INC.



Principal Place of Business

CITRUS CENTER  
255 S. ORANGE AVE., SUITE 800  
ORLANDO FL 32801

Mailing Address

CITRUS CENTER  
255 S. ORANGE AVE., SUITE 800  
ORLANDO FL 32801

3. Date Incorporated or Qualified  
12/18/1995

3a. Date of Last Report

2. Principal Place of Business

21 238 N. Westmonte Dr.

2a. Mailing Address

26 238 N. Westmonte Dr.

4. FEI Number

59-3358803

Applied For

Not Applicable

Suite, Apt. #, etc.

22 Suite 280

Suite, Apt. #, etc.

27 Suite 280

5. Certificate of Status Desired

☐ \$8.75 Additional  
Fee Required

City & State

23 ALTAMONTE SPRINGS FL

City & State

28 Altamonte Spgs, FL

6. Election Campaign Financing  
Trust Fund Contribution

☐ \$5.00 May Be  
Added to Fees

Zip

24 32714

Country

25 U.S.A.

Zip

29 32714

Country

30 U.S.A.

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

MACKINNON, ALEXANDER C  
CITRUS CENTER  
255 S. ORANGE AVE., SUITE 800  
ORLANDO FL 32801

10. Name and Address of New Registered Agent

81 Name

Louis Geys

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

238 N. Westmonte Dr.

83 Suite 280

84 City

Altamonte Spgs, FL

FL

85 Zip Code

32714

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 the corporation

Name of Registered Agent and the corporation

4-15-96

DATE

12. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
GEYS, LOUIS  
238 N. WESTMONTE DR., STE. 280  
ALTAMONTE SPRINGS FL 32714

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ DELETE

TITLE  
NAME  
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CITY-ST-ZIP  
☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP  
☐ Change ☐ Addition

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP  
☐ Change ☐ Addition

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

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

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

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

900001788089

-04/22/96-01020-022

\*\*\*400.00

24.20

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Louis Geys 4-15-96 407-862-5511

Date

Daytime Phone #

CR2E034 (12/95)