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1997 MAY -1 PM 3:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # 99000050509
1. Corporation Name
The CLAY Cafe, Inc.

Principal Place of Business Mailing Address
13 S.W. Osceola Street
Stuart, FL 34994

3. Date Incorporated or Qualified 7-96 3a. Date of Last Report N/A

2. Principal Place of Business 2a. Mailing Address
21 13 S.W. Osceola St. 26 13 S.W. Osceola St.
Suite, Apt. #, etc. Suite, Apt. #, etc.

4. FEI Number 65-0677018 Applied For
Not Applicable

22 City & State 27 City & State

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

23 Stuart, Florida 28 Stuart, Florida
Zip Country Zip Country

6. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be
Added to Fees

24 34994 25 MARTIN 29 34994 30 MARTIN

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PAUL Thibadeau
324 ROYAL PALM WAY
Palm Beach, FL 33480

81 Name SUSAN J. Dunlap
82 Street Address (P.O. Box Number is Not Acceptable)
13 S.W. Osceola Street
83
84 City STUART FL 85 Zip Code 34994

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 SUSAN J. Dunlap DATE 4-26-97

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ DELETE
NAME PRESIDENT
STREET ADDRESS SUSAN J. DUNLAP
CITY-ST-ZIP 801 MAINSAIL CIRCLE
FT. WALTER, FL 33477
1.2 TITLE ☐ DELETE
NAME V. PRESIDENT
STREET ADDRESS BEAD C. DUNLAP
CITY-ST-ZIP 801 MAINSAIL CIRCLE
FT. WALTER, FL 33477
1.3 TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP
1.4 TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP
1.5 TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 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: SUSAN J. Dunlap DATE 4.26.97 DAYTIME PHONE # 561.746.4532

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)