

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000038853

FILED
Apr 24, 2006
Secretary of State

Entity Name: CLARA'S TASK, INC.

Current Principal Place of Business:

3000 CAREFREE BOULEVARD, G85
FT. MYERS, FL 33917

New Principal Place of Business:

1155 VENETIAN HARBOR DR. NE
ST. PETERSBURG, FL 33702

Current Mailing Address:

3000 CAREFREE BOULEVARD, G85
FT. MYERS, FL 33917

New Mailing Address:

1155 VENETIAN HARBOR DR. NE
ST. PETERSBURG, FL 33702

FEI Number: 65-0898540

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCCORMICK, CLARA L
3000 CAREFREE BLVD
G85
FT. MYERS, FL 33917 US

Name and Address of New Registered Agent:

MCCORMICK, CLARA L
1155 VENETIAN HARBOR DR.
ST. PETERSBURG, FL 33702 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:

04/24/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MCCORMICK, CLARA L
Address: 3000 CAREFREE BOULEVARD, G85
City-St-Zip: FT. MYERS, FL 33917

Title: T () Delete
Name: BLEVINS, DANA
Address: 3000 CAREFREE BLVD, G85
City-St-Zip: FT MYERS, FL 33917

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: MCCORMICK, CLARA L
Address: 1155 VENETIAN HARBOR DR. NE
City-St-Zip: ST. PETERSBURG, FL 33702

Title: T (X) Change () Addition
Name: BLEVINS, DANA
Address: 1155 VENETIAN HARBOR DR. NE
City-St-Zip: ST. PETERSBURG, FL 33702

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: CLARA MCCORMICK

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04/24/2006

Electronic Signature of Signing Officer or Director

Date