2005 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Fredric R. Clark, III P.A. Pr

FILED Apr 01, 2005 08:00 AM Secretary of State

Home 626-8808

Daytime Phone #

ANNOAL REPORT				Secretary of State
DOCUMENT # P98000040799 1. Entity Name FREDRIC R. CLARK, III P A				j
Principal Plac	ce of Business	Mailing Address		1
115 LAKESH	iore drive -	115 LAKESHORE DRIVE		
#649	_	#649		
		NORTH PALM BEACH, FL 334	08	
E	O NOT WRITE	IN THIS SPA	CF	03182005 No Chg-P CR2E034 (10/03)
			-	4. FEI Number Applied For 65-0835436 Not Applicable
		<u></u>	, .	5. Certificate of Status Desired S8.75 Additional Fee Required
Name and Address of Current Registered Agent				
CLARK, FREDRIC R III 115 LAKESHORE DRIVE				DO NOT WRITE
#649				IN THIS SPACE
NORTH PALM BEACH, FL 33408				IN THIS SPACE
8. 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. I am familiar with, and accept the obligations of registered agent				
Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature rendred when reinstating) DATE				
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Financin Trust Fund Contribution.				.00 May Be U000000284049 ed to Fees 04/01/05-80051-017 150.00
10.	OFFICERS AND DIF	ECTORS		••
TITLE	D CLASK FRANCISCO			
NAME STREET LORDSON	CLARK, FREDRIC R III			
STREET ADDRESS CITY-ST-ZIP	115 LAKESHORE DR, #649 NORTH PĀLM BEACH, FL 33408			
TITLE			•	
NAME				
STREET ADDRESS			<i>.</i>	
CITY - ST - ZIP				
TITLE NAME				
STREET ADDRESS				
CITY-ST-ZIP				DO NOT WRITE
title Name				IN THIS SPACE
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12. I 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 report or supplemental 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 reported or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all-aids like empowered.				
J. 101.90G,	5. 5. 5. 5. Gray inter, will all address, will	all ener like empowered.	2 .	- 1 // /t -

President