

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000022080

Entity Name: JL-CLARK, INC.

FILED
Apr 24, 2007
Secretary of State

Current Principal Place of Business:

405 S COUNTY RD 214
HAWTHORNE, FL 32640

New Principal Place of Business:

405 S COUNTY RD 21
HAWTHORNE, FL 32640

Current Mailing Address:

405 S COUNTY RD 214
HAWTHORNE, FL 32640

New Mailing Address:

405 S COUNTY RD 21
HAWTHORNE, FL 32640

FEI Number: 65-0908214

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CLARK, LORI L
405 S COUNTY RD 21
HAWTHORNE, FL 32640 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CLARK, JOHN
Address: 405 S CR 21
City-St-Zip: HAWTHORNE, FL 32640

Title: VPST () Delete
Name: CLARK, LORI L
Address: 405 SCR 21
City-St-Zip: HAWTHORNE, FL 32640

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: LORI CLARK

VP

04/24/2007

Electronic Signature of Signing Officer or Director

Date