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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Morthani

Secretary of State DIVISION OF CORPORATIONS

1996

**DOCUMENT #** 

S66483

(6)

CLARK REALTY, INC.



Principal Place of	f Business	Mading Address					
	( BEACH ROAD TY BEACH FL 32407		13220 BACK BEACH ROAD PANAMA CITY BEACH FL 32407				
					3. Date Incorporated or Qualified 07/11/1991	3a. Date of La	ast Report <b>01/1995</b>
2. Principal Plac	e of Business	2a. Mailing Address			4. FEI Number		Applied For
<u> </u>		26		59-3078690		Not Applicable	
Suite, Apt. #, etc.		Suite. Apt. #, etc		5. Certificate of Status Desired		3.75 Additional	
22		27					Fee Required
City & State		Oity & State			Election Campaign Financing Trust Fund Contribution		5.00 May Be Added to Fees
Zφ	Country	Zip	Countr	у	8. This corporation has liability for Florida Statutes		der s. 199.032,
24	9. Name and Address of Current	29 Bagistered Apopt	[30]		10. Name and Address of New F	T .	t
	g. Name and Address of Current	negistereo Agent	8	I Name	10, 145.112 2113 21313 31		
NEILSON, THOMAS L.				B2 Street Address (P.O. Box Number is Not Acceptable)			
	HOMAS DR.			1			
	IA CITY FL 32408		8:	3			
			8	4 City		FL 85	<b>Σ</b> ιρ Code
					ration submits this statement for the pu		o its remistered offer
SIGNATURE	i, and accept the obligations of, Sections of Sections of Sections are secured to the sections of the sections are secured to the sections are sections and the sections are sections are sections.	ratti dud kare - Tib	Olik Indictored Au	Fili Sapati de Seque		DATE	EOLOGO IN 10
12.	OFFICERS AND	DIRECTORS	13.	,T	ADDITIONS/CHANGES TO OFF	ICERS AND DIR	
TITLE	PV		1 1 TIT.:1 1 2 NAM			·	la igs
NAME	CLARK, JAMES P. 13220 BACK BEACH ROAD			EL ADORESS			
STREET ADDRESS CITY - ST - ZIP	PANAMA CITY BCH FL		140114				
TITLE	ST	DELETE	2 1 TiTL			[] Cr	nange 🔲 Addition
NAME	CLARK, KIMBALL J		2.2 NAM	E			
STREET ADDRESS	13220 BACK BEACH ROAD		2.3 STRE	er address			
CITY - ST - ZIF	PANAMA CITY BCH FL			· ST - ZIP			C) Add has
TITLE		DELETE	3 1 1111	ł		C C	nange 🔲 Add tion
NAME			3.2 NAM				
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CITY ST ZIP		T) DELETE	4 1 TITL			C	hange 🔲 Addition
NAME		_	4.2 NAM	!E			
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NAME			5.2 NAM				
STREET ADDRESS				EET ADDRESS			
CITY - ST - ZIP		☐ DELETE	5.4 C/Tr 6.1 T/7L	F S1 - Z:P			hange Addition
TITLE		[_] INCLIE	6.2 NAM	i		L. ·	, <u> </u>
NAME STREET ADDRESS				LET ADDRESS			
CITY-ST-ZIP				r-SF-ZIP			
CITT-ST-ZIF	L				Control 110	2.07/07/12 Flands	Ctatutos   further

14. Ido hereby certify that the information supplied with this filing is voluntarily fornished 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 each; 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 affactment with an address.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/27/96 904-234-3371