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

PROFIT CORPORATION



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1996 V33656 **DOCUMENT #** CLARK & CLARK INCOME TAX SERVICE, INC. Mailing Address Principal Place of Business 228 S COURTENEY PKWY 228 S COURTENEY PKWY SUITE 2 SHITE 2 MERRITT ISLAND FL 32952 MERRITT ISLAND FL 32952 3a. Date of Last Report 3. Date incorporated or Qualified 03/14/1995 05/01/1992 Applied For 4, FEI Number 2a. Mailing Address 2. Principal Place of Business 59-3119525 Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 \$5.00 May Be 6. Election Campaign Financing City & State City & State Added to Fees Trust Fund Contribution 28 23 8. This corporation has liability for intangible tax under s 199.032, Country Ζıp Country Zin Yes No Florida Statutes 30 29 25 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name Street Address (P.O. Box Number is Not Acceptable) CLARK, JOSEPH L. 82 1775 MANATEE CT 83 MERRITT ISLAND FL 32952 Zip Code 85 84 City 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 DATE (NOTE: Registered Agent signature required when renistating) Signature, typed or pricted hank of registered agent and their application ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Addition DELFTE Change 1.1 0006 TITLE 1.2 NAME TILLEN, CARL J. 1340 TROUT ST. 1.3 STREET ADDRESS STREET ADDRESS MERRITT ISLAND FL 1.4 CHTY - ST - ZIP CITY - ST - ZIP Change Addition DELETE 2.1 1111.6 TITLE TILLEN, RAMONA S. 2.2 NAME NAMÉ 2.3 STREET ADDRESS 1340 TROUT ST. STREET ADDRESS MERRITT ISLAND FL 2.4 CITY - ST. ZiP CITY - ST - ZIP Change Addition DELETE 3 1 TIT.E TITLE 3.2 NAME TILLEN, SARAH A. NAME 3.3 STREET ADDRESS 1340 TROUT ST. STREE! ADDRESS MERRITT ISLAND FL 34 City - ST ZiP CHTY - ST - 71P Change Addition DELETE 4 1 FITLE TOLE 4.2 NAME CLARK, RUBY S. NAME 4.3 STREET ADDRESS 1775 MANATEE CT. STREET ADDRESS MERRITT ISLAND FL 4.4.0-TY ST-ZIP CHTY - ST - ZIP ☐ Addition Charge DELETE 5 THE TITLE 5.2 NAME CLARK, JOSEPH L. NAME 5.3 STREET ADDRESS 1775 MANATEE CT. STREET ADDRESS MERRITT ISLAND FL 5.4 CITY - ST - ZIP DITY-ST-ZP Addition Change DOLLETE 6 1 HILL TITLE 6.2 NAME

14. I do hereby certify that the information supplied with this filing is voluntarily furnished 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 cath; 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 chapted, or on an attachment with an address

6.3 STREET ADDRESS

64 CHY ST-ZIF

SIGNATURE:

STREET ADDRESS

CR2E034 (12/95)