2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000005082

Entity Name: CLARK NEXSEN, INC.

Current Principal Place of Business:

4525 MAIN STREET, SUITE 1400 VIRGINIA BEACH. VA 23462

Current Mailing Address:

4525 MAIN STREET, SUITE 1400 VIRGINIA BEACH. VA 23462 US

FEI Number: 54-0613222 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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:

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title CFO, DIRECTOR, SECRETARY, Title DIRECTOR

TREASURER Name KEEN, WILLIAM R HALL, GREGORY J

Name HALL, GREGORY J Address 4525 MAIN STREET

Address 4525 MAIN STREET, SUITE 1400 SUITE 1400

City-State-Zip: VIRGINIA BEACH VA 23462 City-State-Zip: VIRGINIA BEACH VA 23462

Title DIRECTOR Title DIRECTOR

Name ARANYI, PETER J Name ESTEP, SAMUEL K

Address 1111 METROPOLITAN AVE. Address 4525 MAIN STREET

STE.333

City-State-Zip: CHARLOTTE NC 28204 City-State-Zip: VIRGINIA BEACH VA 23462

Title DIRECTOR, PRESIDENT Title DIRECTOR

Name HALL, TERESA S Name BURKHOLDER, ROBERT

Address 4525 MAIN STREET, SUITE 1400 Address 4525 MAIN STREET, SUITE 1400

City-State-Zip: VIRGINIA BEACH VA 23462 City-State-Zip: VIRGINIA BEACH VA 23462

Title DIRECTOR Title DIRECTOR

Name BRASIER, CHRIS Name CEASE, CLYMER

Address 333 FAYETTEVILLE STREET, Address 333 FAYETTEVILLE STREET

STE. 1000 STE. 1000

City-State-Zip: RALEIGH NC 27601 City-State-Zip: RALEIGH NC 27601

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SUITE 1400

I hereby 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 all other like empowered.

SIGNATURE: TERESA S HALL PRESIDENT 01/22/2020

Electronic Signature of Signing Officer/Director Detail

Date

FILED Jan 22, 2020

Secretary of State

7888529651CC

Officer/Director Detail Continued:

Title DIRECTOR Title DIRECTOR

Name HARDIE, CLINT Name ROBERSON, CHAD

Address 440 MARTIN LUTHER KING JR. BLVD. Address 301 COLLEGE STREET, SUITE 300

City-State-Zip: MACON GA 31201 City-State-Zip: ASHEVILLE NC 28801

Title DIRECTOR

Name POULTNEY, CHAD

Address 4525 MAIN STREET, SUITE 1400

City-State-Zip: VIRGINIA BEACH VA 23462