



LIMITED LIABILITY COMPANY ANNUAL REPORT

NAME OF LIMITED LIABILITY COMPANY: Will Clark Properties LLC

SOSID: 1291094
Date Filed: 2/1/2023
Elaine F. Marshall
North Carolina Secretary of State
CA2023 032 01018

SECRETARY OF STATE ID NUMBER: 1291094 STATE OF FORMATION: NC

REPORT FOR THE CALENDAR YEAR: 2023



Filing Office Use Only
 Changes

SECTION A: REGISTERED AGENT'S INFORMATION

1. NAME OF REGISTERED AGENT: John S. Williford Jr.

2. SIGNATURE OF THE NEW REGISTERED AGENT: _____
SIGNATURE CONSTITUTES CONSENT TO THE APPOINTMENT

3. REGISTERED AGENT OFFICE STREET ADDRESS & COUNTY 4. REGISTERED AGENT OFFICE MAILING ADDRESS
422 Sunset Ave. P O Box 4538
Rocky Mount, NC 27804 Nash Rocky Mount, NC 27803

SECTION B: PRINCIPAL OFFICE INFORMATION

1. DESCRIPTION OF NATURE OF BUSINESS: Real Property

2. PRINCIPAL OFFICE PHONE NUMBER: (252) 442-3115 3. PRINCIPAL OFFICE EMAIL: _____

4. PRINCIPAL OFFICE STREET ADDRESS 5. PRINCIPAL OFFICE MAILING ADDRESS
422 Sunset Ave. P O Box 4538
Rocky Mount, NC 27804 Rocky Mount, NC 27803



6. Select one of the following if applicable. (Optional see instructions)

- The company is a veteran-owned small business
- The company is a service-disabled veteran-owned small business

SECTION C: COMPANY OFFICIALS (Enter additional company officials in Section E.)

NAME: Meredith G. Cooper NAME: _____ NAME: _____
TITLE: Manager TITLE: _____ TITLE: _____
ADDRESS: _____ ADDRESS: _____ ADDRESS: _____
233 Kandemor Lane
Rocky Mount, NC 27804

SECTION D: CERTIFICATION OF ANNUAL REPORT. Section D must be completed in its entirety by a person/business entity.

x Meredith G. Cooper SIGNATURE x January 24, 2023 DATE

Form must be signed by a Company Official listed under Section C of This form.

Meredith G. Cooper manager
Print or Type Name of Company Official Print or Type Title of Company Official

SUBMIT THIS ANNUAL REPORT WITH THE REQUIRED FILING FEE OF \$200

MAIL TO: Secretary of State, Business Registration Division, Post Office Box 29525, Raleigh, NC 27626-0525