

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 847966

FILED
Jun 25, 2009
Secretary of State

Entity Name: ST. CLAIR CORPORATION, INC.

Current Principal Place of Business:

5182 GREYSTONE WAY
BIRMINGHAM, AL 35242

New Principal Place of Business:

Current Mailing Address:

5182 GREYSTONE WAY
BIRMINGHAM, AL 35242

New Mailing Address:

FEI Number: 59-2011515 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STONEBURNER, GRESHAM R
841 PRUDENTIAL DRIVE
SUITE 1400
JACKSONVILLE, FL 32207 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SUTHERLIN, STEPHEN M.
Address: 5182 GREYSTONE WAY
City-St-Zip: BIRMINGHAM, AL 35242

Title: SD () Delete
Name: AMARI, RICHARD S.
Address: 96 WILLARD ST., STE #302
City-St-Zip: COCOA, FL

Title: TD () Delete
Name: PAYNE, ROBERT W.
Address: 269 SOUTH 7TH STREET
City-St-Zip: GADSDEN, FL

Title: D () Delete
Name: SUTHERLIN, GEORGE A.
Address: 289 WEST PACES FERRY RD
City-St-Zip: ATLANTA, GA

Title: D () Delete
Name: SUTHERLIN, KAREN B.
Address: 4811 BEACH BLVD., SUITE 300
City-St-Zip: JACKSONVILLE, FL 32207

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: STEPHEN M SUTHERLIN

PD

06/25/2009

Electronic Signature of Signing Officer or Director

_____ Date