

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 242792

Entity Name: BARCLAY HOUSE INC

FILED  
Jan 30, 2009  
Secretary of State

## Current Principal Place of Business:

715 N E FIRST CT  
DELRAY BEACH, FL 33483

## New Principal Place of Business:

## Current Mailing Address:

715 N E FIRST CT  
DELRAY BEACH, FL 33483

## New Mailing Address:

FEI Number: 59-1004408

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HOGAN, GLENNA  
715 NE 1ST CT. #1-E  
DELRAY BEACH, FL 33483 US

## Name and Address of New Registered Agent:

HOGAN, GLENNA  
715 NE 1ST CT.  
#1D  
DELRAY BEACH, FL 33483 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:

01/30/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: S ( ) Delete  
Name: GOODLEAF, WANDA K  
Address: 215 NE 1ST CT #2C  
City-St-Zip: DELRAY BEACH, FL 33483

Title: P ( ) Delete  
Name: CRABTREE, RICHARD  
Address: 715 NE 1ST CT. #2D  
City-St-Zip: DELRAY BEACH, FL

Title: V ( ) Delete  
Name: HOGAN, GLENNA  
Address: 715 NE 1ST CT. #1-D  
City-St-Zip: DELRAY BCH, FL

Title: T ( ) Delete  
Name: THISSE, AMY  
Address: 715 NE 1ST CT #2A  
City-St-Zip: DELRAY BEACH, F;

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S (X) Change ( ) Addition  
Name: GOODLEAF, WANDA K  
Address: 715 NE 1ST CT #2C  
City-St-Zip: DELRAY BEACH, FL 33483

Title: P (X) Change ( ) Addition  
Name: CRABTREE, RICHARD  
Address: 715 NE 1ST CT. #2D  
City-St-Zip: DELRAY BEACH, FL 33483

Title: V (X) Change ( ) Addition  
Name: HOGAN, GLENNA  
Address: 715 NE 1ST CT. #1D  
City-St-Zip: DELRAY BCH, FL 33483

Title: T (X) Change ( ) Addition  
Name: THISSE, AMY  
Address: 715 NE 1ST CT #2A  
City-St-Zip: DELRAY BEACH, F; 33483

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: GLENNA HOGAN

V

01/30/2009

Electronic Signature of Signing Officer or Director

Date