

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 319828

Entity Name: CLAGETT TAYLOR, INC.

FILED  
Apr 13, 2007  
Secretary of State

## Current Principal Place of Business:

P.O. BOX 942  
SEBRING, FL 33871

## New Principal Place of Business:

334 MATLO AVE  
SEBRING, FL 33871

## Current Mailing Address:

P.O. BOX 942  
SEBRING, FL 338710942

## New Mailing Address:

FEI Number: 59-1209256

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

RHOADES, CLIFFORD R  
227 NORTH RIDGEWOOD DRIVE  
SEBRING, FL 33870 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: TAYLOR JR, J CLAGETT,  
Address: 336 MATLO AVE  
City-St-Zip: SEBRING, FL 33870

Title: VPD ( ) Delete  
Name: TAYLOR, PATRICIA K.,  
Address: 336 MATLO AVE  
City-St-Zip: SEBRING, FL 33870

Title: D ( ) Delete  
Name: VALENCIA, DEBORAH T.,  
Address: 42048 CRESTVIEW CIRCLE  
City-St-Zip: NORTHVILLE, MI 48168

Title: D ( ) Delete  
Name: TAYLOR, J. CLAGETT, III  
Address: 2611 COVENTRY LANE  
City-St-Zip: OCOEE, FL 34761

Title: TD ( ) Delete  
Name: TAYLOR, JOHN A.,  
Address: 3207 OLEANDER DRIVE  
City-St-Zip: LAKE PLACID, FL 33852

## 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 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: JOHN A. TAYLOR

TREA

04/13/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date