2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 345852

1. Entity Name
CLAMOW, INC.

Principal Place of Business	Mailing Address
353 KENT MILL POND RD CHIPLEY, FL 32428 US	353 KENT MILL POND RD CHIPLEY, FL 32428 US

DO NOT WRITE IN THIS SPACE

06282005   No Chg-P   CR2E034 (10/03)

4. FEI Number	Applied For
59-1287666	Not Applicable

5. Certificate of Status Desired ☑ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

MOODY, CHRISTINE
353 KENT MILL POND RD
CHIPLEY, FL 32428

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable.   (NOTE. Registered Agent signature required when reinstating)   DATE

FILE NOW!!! FEE IS $550.00
Due by September 7, 2005

9. Election Campaign Financing Trust Fund Contribution. ☐   **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	MOODY, CHRISTINE
STREET ADDRESS	353 KENT MILL POND RD
CITY-ST-ZIP	CHIPLEY, FL
TITLE	STD
NAME	BALDRY, SUSAN MOODY
STREET ADDRESS	353 KENT MILL POND RD
CITY-ST-ZIP	CHIPLEY, FL

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07/01/05-80005-006 558.75

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119 07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _Christine Moody_   Christine Moody   6/30/05   850 638-1122

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #