

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 707694

FILED
Jan 09, 2007
Secretary of State

Entity Name: THE CLAY MAVERICKS, INC.

Current Principal Place of Business:

308TANGLEWOOD BLVD
ORANGE PARK, FL 32068 US

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 1223
MIDDLEBURG, FL 32068 US

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WORTHINGTON, LINDA
4252 JOHNS CEMETERY ROAD
MIDDLEBURG, FL 32068 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

OFFICERS AND DIRECTORS:

Title: BD () Delete
Name: HARDEN, SANDI
Address: 4161 FALCON RD. LN
City-St-Zip: MIDDLEBURG, FL 32068

Title: VP () Delete
Name: HARDIN, JOE
Address: 4161 FALCON RD LN
City-St-Zip: MIDDLEBURG, FL 32068

Title: BD () Delete
Name: SHERMAN, SUE
Address: 4290 FALCON RD. LN
City-St-Zip: MIDDLEBURG, FL 32068

Title: AD () Delete
Name: HITER, KENT
Address: 8886 MARLEE ROAD
City-St-Zip: JACKSONVILLE, FL 32222

Title: P () Delete
Name: BICKHART, DONNA
Address: 58 FEATHER LANE
City-St-Zip: MIDDLEBURG, FL 32068

Title: T () Delete
Name: WORTHINGTON, LINDA
Address: 4252 JOHNS CEMETARY RD
City-St-Zip: MIDDLEBURG, FL 32068

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
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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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LINDA WORTHINGTON

T

01/09/2007

Electronic Signature of Signing Officer or Director

Date