2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 765617

FILED Aug 24, 2007 Secretary of State

Entity Name: CLAN ROSS ASSOCIATION OF THE UNITED STATES, INC.

Current Principal Place of Business: New Principal Place of Business: 1004 N. BOWEN ARLINGTON, TX 76012 US **Current Mailing Address: New Mailing Address:** 1004 N. BOWEN ARLINGTON, TX 76012 US FEI Number: 59-2369997 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ROSS, LAWERENCE F 205 RÉDWING COURT CASSELBERRY, FL 32707 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: **PRES** () Delete (X) Change () Addition ROSS, HUGH Name: ROSS HUGH Name: 1004 N. BOWEN Address: 1004 N. BOWEN Address: City-St-Zip: ARLINGTON, TX 76012 US City-St-Zip: ARLINGTON, TX 76012 US Title: () Delete Title: () Change () Addition ROSS, CHARLES L Name: Name: Address: 5044 VIA DONALDO Address: City-St-Zip: YORBA LINDA, CA 92886 US City-St-Zip: Title: MS () Delete Title: (X) Change () Addition MAY, CHERYL VANEPS, JANET Name: Name: 6143 SIENNA ARBOR LAND Address: Address: 2115 AMES ST. City-St-Zip: HOUSTON, TX 77041 60 City-St-Zip: EDGEWATER, CO 80214 Title: () Delete Title: SEC (X) Change () Addition Name: ROSS, SHIRLEY Name: MORRIS, MARGARET 235 S. JEFFERSON ST. 5101 CLOVER VALLEY DR. Address: Address: City-St-Zip: GALION, OH 44833 City-St-Zip: THE COLONY, TX 75056 Title: () Delete Title: (X) Change () Addition STATEN, CATHERINE ROSS, HUGH Name: Name: 3513 SILVERSTONE DRIVE 1004 N. BOWEN RD. Address: Address: City-St-Zip: WHITEWATER, CO 81527 City-St-Zip: ARLINGTON, TX 76012 Title: () Delete Title: () Change (X) Addition ROSS NEIL Name: Name: Address: Address: 1008 LAS GALLINAS AVE SAN RAFAEL, CA 94903 City-St-Zip: 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: HUGH ROSS PRES 08/24/2007