

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000004043

Entity Name: R.D. CLIFTON CO., INC.

FILED
May 12, 2009
Secretary of State

Current Principal Place of Business:

2586 N.C. 403 WEST
FAISON, NC 28341

New Principal Place of Business:

Current Mailing Address:

PO BOX 206
FAISON, NC 28341

New Mailing Address:

FEI Number: 56-2117166

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CLIFTON, KIM
7930 TWIN EAGLE LANE
FORT MYERS, FL 33912 US

Name and Address of New Registered Agent:

WALKER, KIMBERLY C V.P.
7930 TWIN EAGLE LANE
FORT MYERS, FL 33912 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: KIM CLIFTON WALKER

05/12/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DST () Delete
Name: CLIFTON, KIMBERLY G
Address: 7930 TWIN EAGLE LANE
City-St-Zip: FORT MYERS, FL 33912

Title: PC () Delete
Name: CLIFTON, JOHN D
Address: PO BOX 206
City-St-Zip: FAISON, NC 28341

Title: D () Delete
Name: CLIFTON, J. CHRISTOPHER
Address: 9400 CLOVER CREST CT
City-St-Zip: RALEIGH, NC 27617

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DST (X) Change () Addition
Name: WALKER, KIMBERLY C V.P.
Address: 7930 TWIN EAGLE LANE
City-St-Zip: FORT MYERS, FL 33912

Title: PC (X) Change () Addition
Name: CLIFTON, JOHN D PRES
Address: PO BOX 206
City-St-Zip: FAISON, NC 28341

Title: () Change () Addition
Name:
Address:
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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN D. CLIFTON

PRES

05/12/2009

Electronic Signature of Signing Officer or Director

Date