

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

Mail to: Department of State
Div. of Corporations; Corporate Filings
PO Box 6327
Tallahassee, FL 32314

FILED
Feb 28, 2006 08:00 AM
Secretary of State

DOCUMENT # F05000006437

1. Entity Name
BARCLAY HOLDING OF DELAWARE, INC.



Principal Place of Business
2626 GLENWOOD AVENUE, SUITE 200
RALEIGH, NC 27608

Mailing Address
2626 GLENWOOD AVENUE, SUITE 200
RALEIGH, NC 27608



02132008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-2319464

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

**DO NOT WRITE
IN THIS SPACE**

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 \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

1100000452351
03/11/06-80023-021 50.00

10. OFFICERS AND DIRECTORS

TITLE D
NAME WINSTON, ROBERT W
STREET ADDRESS 2626 GLENWOOD AVENUE, SUITE 200
CITY-ST-ZIP RALEIGH, NC 27608

TITLE D
NAME DARDEN, THOMAS
STREET ADDRESS 2626 GLENWOOD AVENUE, SUITE 200
CITY-ST-ZIP RALEIGH, NC 27608

TITLE D
NAME DAUGHERTY, RICHARD
STREET ADDRESS 2626 GLENWOOD AVENUE, SUITE 200
CITY-ST-ZIP RALEIGH, NC 27608

TITLE D
NAME WINSTON, CHARLES
STREET ADDRESS 2626 GLENWOOD AVENUE, SUITE 200
CITY-ST-ZIP RALEIGH, NC 27608

TITLE P
NAME GREEN, JOSEPH V
STREET ADDRESS 2626 GLENWOOD AVENUE, SUITE 200
CITY-ST-ZIP RALEIGH, NC 27608

TITLE VP
NAME WEST, BRENT V
STREET ADDRESS 2626 GLENWOOD AVENUE, SUITE 200
CITY-ST-ZIP RALEIGH, NC 27608

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Brent V. West, VP

2/17/06

Date

919-510-6010

Daytime Phone #