2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000006879

Entity Name: MCLEMORE INTERESTS, INC.

FILED Jan 05, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3355 W. ALABAMA SUITE 1150 HOUSTON, TX 77098

Current Mailing Address: New Mailing Address:

3355 W. ALABAMA SUITE 1150 HOUSTON, TX 77098

FEI Number: 20-5396584 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CAPITOL CORPORATE SERVICES, INC.

155 OFFICE PLAZA DRIVE

SUITE A

TALLAHASSEE, FL 32301 US

MCLEMORE, K L MR.

79 10TH STREET

APALACHICOLA, FL 32320 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: K.L. MCLEMORE 01/05/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition MCLEMORE, SH MCLEMORE, SCOTT H Name: Name: 3355 W. ALABAMA #1150 3355 W. ALABAMA #1150 Address: Address: City-St-Zip: HOUSTON, TX 77098 City-St-Zip: HOUSTON, TX 77098

Title: S () Delete Title: () Change () Addition Name: BURLEY, JOHN M Name:

 Name:
 BURLEY, JOHN M
 Name:

 Address:
 3355 W. ALABAMA #1150
 Address:

 City-St-Zip:
 HOUSTON, TX 77098
 City-St-Zip:

Title: () Delete Title: D () Change (X) Addition

 Name:
 Name:
 MCLEMORE, DAVIS S

 Address:
 Address:
 3355 W. ALABAMA #1150

 City-St-Zip:
 City-St-Zip:
 HOUSTON, TX 77098

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: SCOTT HANSON MCLEMORE P 01/05/2009