## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# J12157

Address:

City-St-Zip:

203 VISTA OAK DR

LONGWOOD, FL 32779

Entity Name: CLINT PROPERTIES, INC.

FILED Apr 24, 2007 Secretary of State

Current Principal Place of Business:			New Principal Place of	New Principal Place of Business:	
801 INTERNTIONAL PARKWAY SUITE 500			1525 INTERNTIONAL PA SUITE 2001	ARKWAY	
LAKE MAR	Y, FL 32746	US	LAKE MARY, FL 32746	US	
Current Mailing Address:			New Mailing Address:		
801 INTERNATIONAL PARKWAY				1525 INTERNATIONAL PARKWAY	
SUITE 500 LAKE MAR	Y, FL 32746	US	SUITE 2001 LAKE MARY, FL 32746	US	
FEI Number:	59-2709024	FEI Number Applied For ( )	FEI Number Not Applicable()	Certificate of Status Desired ( )	
Name and	Address of Cu	rrent Registered Agent:	Name and Address of I	Name and Address of New Registered Agent:	
MCDANIEL, CRISTY M. 203 VISTA OAK DRIVE LONGWOOD, FL 32779 US			SUITE 2001	1525 INTERNATIONAL PARKWAY	
The above in the State	named entity su of Florida.	bmits this statement for the purp	oose of changing its registered o	office or registered agent, or both,	
SIGNATURE:				04/24/2007	
	Electronic	Signature of Registered Agent		Date	
Election Carr	paign Financing	Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () E MCDANIEL, DAVI 203 VISTA OAK E LONGWOOD, FL	DRIVE	Title: ( Name: Address: City-St-Zip:	) Change ()Addition	
Title: Name: Address: City-St-Zip:	VP () E MCCLINTOCK, N 5380 N. OCEAN I SINGER ISLAND	DRIVE (II3J)	Title: ( Name: Address: City-St-Zip:	) Change ()Addition	
Title: Name: Address: City-St-Zip:	VP () E MCCLINTOCK, Ju 5380 N. OCEAN I SINGER ISLAND	DRIVE, (II 3J)	Title: ( Name: Address: City-St-Zip:	) Change ()Addition	
Title: Name:	S/T ()E	Delete STY M.,	Title: ( Name:	) Change ( ) Addition	

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

Address:

City-St-Zip:

SIGNATURE: DAVID G. MCDANIEL PD 04/24/2	2007
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