

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K24656

FILED
Feb 13, 2006
Secretary of State

Entity Name: CLARENDON PROPERTIES INC.

Current Principal Place of Business:

1395 BRICKELL AVE #200
STE 340
MIAMI, FL 33131 US

New Principal Place of Business:

Current Mailing Address:

1395 BRICKELL AVE #200
STE 340
MIAMI, FL 33131 US

New Mailing Address:

FEI Number: 65-0056503 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THE STEWART LAW FIRM
1395 BRICKELL AVE #650
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: WILLIAM N. ROSS,
Address: 1395 BRICKELL AVE #200
City-St-Zip: MIAMI, FL 33131

Title: SVP () Delete
Name: PENICHET, TERESA A,
Address: 1395 BRICKELL AVE #200
City-St-Zip: MIAMI, FL 33131

Title: D () Delete
Name: WIENER, WILLIAM
Address: 1395 BRICKELL AVE #200
City-St-Zip: MIAMI, FL 33131

Title: D () Delete
Name: SENKER, JOSEPH A
Address: 1395 BRICKELL AVE #200
City-St-Zip: MIAMI, FL 33131

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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.

SIGNATURE: WILLIAM ROSS

PD

02/13/2006

Electronic Signature of Signing Officer or Director

_____ Date