

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K65596

Entity Name: CLAY PRODUCTS, INC.

FILED
Jul 11, 2006
Secretary of State

Current Principal Place of Business:

C/O LINDA KINLEY
5629 RODMAN STREET
HOLLYWOOD, FL 33023

New Principal Place of Business:

C/O LINDA CRABTREE
5629 RODMAN STREET
HOLLYWOOD, FL 33023

Current Mailing Address:

C/O LINDA KINLEY
5629 RODMAN STREET
HOLLYWOOD, FL 33023

New Mailing Address:

C/O LINDA CRABTREE
5629 RODMAN STREET
HOLLYWOOD, FL 33023

FEI Number: 65-0096496

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CRABTREE, LINDA
5629 RODMAN STREET
HOLLYWOOD, FL 33023 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

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: PSD () Delete
Name: CRABTREE, LINDA
Address: 5629 RODMAN STREET
City-St-Zip: HOLLYWOOD, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: LINDA CRABTREE

PSD

07/11/2006

Electronic Signature of Signing Officer or Director

_____ Date