2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000010101

Entity Name: CLINT WRIGHT FOUNDATION, INCORPORATED

FILED Feb 16, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1021 LAKELAND HILLS BLVD. LAKELAND, FL 33805 **Current Mailing Address: New Mailing Address:** 2575 GERBER DAIRY RD WINTER HAVEN, FL 33880 FEI Number: 26-0664332 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: WRIGHT, DEBRA L WRIGHT, DEBRA S 1903 SYLVESTER RD. 2575 GERBER DAIRY RD US LAKELAND, FL 33803 LAKELAND, FL 33880 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: DEBRA 02/16/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition WRIGHT, DEBRA S. WRIGHT, DEBRA S Name: Name: 2575 GERBER DAIRY RD. Address: 2575 GERBER DAIRY RD. Address: City-St-Zip: WINTER HAVEN, FL 33880 City-St-Zip: WINTER HAVEN, FL 33880 Title: Title: () Delete () Change () Addition WRIGHT, SAMUEL JR. Name: Name: Address: 3270 ALBERTA RD. Address: City-St-Zip: BARTOW, FL 33880 City-St-Zip: Title: () Delete Title: () Change () Addition GRIZZARD, LESLIE Name: Name: 2740 SOUTHINGTON AVE. Address: Address: City-St-Zip: LAKELAND, FL 33803 City-St-Zip: Title: () Delete Title: (X) Change () Addition Name: SHERROUSE, BECKY Name: SHERROUSE, BECKY 21 LAKELAND HILLS BLVD 3551 DALTON S. LANE Address: Address: City-St-Zip: LAKELAND, FL 33805 City-St-Zip: LAKELAND, FL 33810 Title: () Delete Title: (X) Change () Addition LUNSFORD, KATRINA LUNSFORD, KATRINA L Name: Name: 3733 PAULA CT. 3733 PAULA CT. Address: Address: City-St-Zip: LAKELAND, FL 33081 City-St-Zip: LAKELAND, FL 33081 Title: () Delete Title: () Change () Addition WRIGHT-HAGGINS, ASHLEE

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

Name:

Address:

City-St-Zip:

SIGNATURE: KATRINA L. LUNSFORD Т 02/16/2009

Name:

Address:

City-St-Zip:

2575 GERBER DAIRY RD.

WINTER HAVEN, FL 33880