2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 22, 2011
Secretary of State

DOCUMENT# N20264

Entity Name: CLAN GILLEAN USA INC.

Current Principal Place of Business:

3173 SHARP DRIVE
LENOIR CITY, TN 37771 US

New Principal Place of Business:

Current Mailing Address:

P.O.BOX 1280
LENOIR CITY, TN 377711280

New Mailing Address:

FEI Number: 61-1592529 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FORSMAN, ROBERT H
4010 OAK HAMMOCK LANE
FT. PIERCE, FL 34981 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

OFFICERS AND DIRECTORS:

Title: PD
Name: MCLEAN, ROBERT S
Address: 1333 PINE TRAIL
City-St-Zip: CLAYTON, NC 275209345 US

Title: TD
Name: LANE, MARK A SR
Address: 3173 SHARP DR.
City-St-Zip: LENOIR CITY, TN 37771 US

Title: VP
Name: MACLEAN, PATRICK R
Address: 13903 CINNABAR PLACE
City-St-Zip: HUNTERSVILLE, NC 28078 US

Title: PP
Name: HICKS, CLAUDE W JR.
Address: 3072 ASHBY DRIVE
City-St-Zip: MACON, GA 31204 US

Title: PP
Name: GREEK, CLARENCE N
Address: 2519 REGENCY PARK DR
City-St-Zip: MURFREESBORO, TN 37129 US

Title: SD
Name: HENDRESCHKE, NANCY M
Address: 1005 JULIUS DRIVE
City-St-Zip: SUWANEE, GA 30024 US

I hereby 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 all other like empowered.

SIGNATURE: MARK A. LANE TD 02/22/2011
Electronic Signature of Signing Officer or Director Date