

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N24730

FILED
Mar 24, 2009
Secretary of State

Entity Name: THE CLAN MACKENZIE SOCIETY IN THE AMERICAS, INC.

Current Principal Place of Business:

5847 TROUT RIVER BLVD
JACKSONVILLE, FL 32219 US

New Principal Place of Business:

Current Mailing Address:

5847 TROUT RIVER BLVD
JACKSONVILLE, FL 32219 US

New Mailing Address:

FEI Number: 59-2952673

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCKENZIE, ROBERT
5847 TROUT RIVER BLVD
JACKSONVILLE, FL 32219 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: D P () Delete
Name: MCKENZIE, DONALD B
Address: PO BOX 1294
City-St-Zip: PINEHURST, NC 38370

Title: D S () Delete
Name: WRIGHT, HOWARD
Address: 2526 WILLIAMS LAKE ROAD
City-St-Zip: WATERFORD, MI 48327

Title: D () Delete
Name: MACKENZIE, BLAIR
Address: 7028 BRADLEY CIRCLE
City-St-Zip: ANNANDALE, VA 22003

Title: D V () Delete
Name: MCKENZIE, ASA G
Address: 18720 BORCK ROAD
City-St-Zip: GULF SHORES, AL 36542

Title: DT () Delete
Name: STUMP, JAMES E
Address: 6226 POPP ROAD
City-St-Zip: FORT WAYNE, IN 46845

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:

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

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.

SIGNATURE: JAMES E. STUMP

TRES

03/24/2009

Electronic Signature of Signing Officer or Director

Date