

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000001506

FILED
Jun 23, 2009
Secretary of State

Entity Name: THE CLIO FOUNDATION, INC.

Current Principal Place of Business:

6061 SECOND ST., E.
#42
SAINT PETERSBURG, FL 33706

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 5110
GULFPORT, FL 33737

New Mailing Address:

FEI Number: 59-3316655 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

DAVIS, ANN
6061 SECOND ST E
#42
ST PETERSBURG BEACH, FL 33706 US

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 () Delete
Name: BUCKLEY, JANET
Address: 3232 S. MACDILL
City-St-Zip: TAMPA, FL 33629

Title: TD () Delete
Name: FINEGAN, PATRICIA
Address: 6061 SECOND ST E, #56
City-St-Zip: SAINT PETERSBURG, FL 33706

Title: SD () Delete
Name: NEAL, SUNNY
Address: 2512-57 ST. S.
City-St-Zip: GULFPORT, FL 33707

Title: D () Delete
Name: DAVIS, ANN C
Address: 6061 2ND ST E #42
City-St-Zip: SAINT PETERSBURG BEACH, FL 33706

Title: PD () Delete
Name: DAVIS, ANN C
Address: 6061 2ND ST. E, #42
City-St-Zip: SAINT PETERSBURG, FL 33706

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: SD (X) Change () Addition
Name: NEAL, SUNNY
Address: 4201 - 38TH AVE., S.
City-St-Zip: ST. PETERSBURG, FL 33707

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: ANN C. DAVIS

PRES

06/23/2009

Electronic Signature of Signing Officer or Director

Date