

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2008 8:00 am
Secretary of State

04-30-2008 90192 050 ***155.00

DOCUMENT # P01000095265	
1. Entity Name CLAYTON REALTY MANAGEMENT GROUP, INC.	

Principal Place of Business 5405 DIPLOMAT CIRCLE, SUITE 100 ORLANDO, FL 32810	Mailing Address 5405 DIPLOMAT CIRCLE, SUITE 100 ORLANDO, FL 32810
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2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc. City & State Zip Country	3. Mailing Address Suite, Apt. #, etc. City & State Zip Country
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04282008 Chg-P CR2E034 (12/06)

4. FEI Number 59-3747364	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent CLAYTON, KENNETH M % CLAYTON & MCCULLON 1065 MAITLAND CENTER COMMONS BLVD MAITLAND, FL 32751	7. Name and Address of New Registered Agent Name CLAYTON, KENNETH M. Street Address (P.O. Box Number is Not Acceptable) 46 CLAYTON & MCCULLON 1065 MAITLAND CENTER COMMONS BLVD City MAITLAND FL Zip Code 32751
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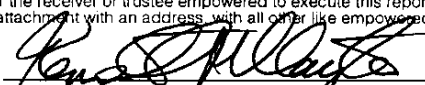
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reconstituting) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CLAYTON, W MALCOLM <input checked="" type="checkbox"/> Delete 5405 DIPLOMAT CIRCLE STE 100 ORLANDO, FL 32810	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WARREN, MARY C <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 5405 DIPLOMAT CIRCLE STE 100 ORLANDO, FL 32810
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CLAYTON, MARK A <input type="checkbox"/> Delete 5405 DIPLOMAT CIRCLE, SUITE 100 ORLANDO, FL 32810	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CLAYTON, BRANTLY W <input type="checkbox"/> Delete 5405 DIPLOMAT CIRCLE, SUITE 100 ORLANDO, FL 32810	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CLAYTON, KENNETH M <input type="checkbox"/> Delete 1065 MAITLAND CENTER COMMONS BLVD MAITLAND, FL 32751	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CLAYTON, CRAIG H <input type="checkbox"/> Delete 5405 DIPLOMAT CIRCLE, SUITE 100 ORLANDO, FL 32810	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SEALY, CAROL C <input type="checkbox"/> Delete 5405 DIPLOMAT CIRCLE, SUITE 100 ORLANDO, FL 32810	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **Kenneth M. Clayton, Director** **4/29/08** **407-875-2655**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #