

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000006911

Entity Name: CLIFTWOOD CORP.

FILED
Apr 01, 2005
Secretary of State

Current Principal Place of Business:

7101 W. ANTHONY RD, #4
OCALA, FL 34479

New Principal Place of Business:

Current Mailing Address:

PO BOX 4301
OCALA, FL 34478

New Mailing Address:

PO BOX 1464
ANTHONY, FL 32617

FEI Number: 30-0016543

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRINSON, MONA G
1100 SE 52ND CT.
OCALA, FL 34471 US

Name and Address of New Registered Agent:

TYLER, SHELLEY
7101-4 WEST ANTHONY ROAD
OCALA, FL 34479 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: SHELLEY TYLER

04/01/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BRINSON, MONA G
Address: 1100 SE 52ND CT.
City-St-Zip: Ocala, FL 34471

Title: D (X) Delete
Name: BRINSON, M.M. III
Address: 1100 SE 52ND CT.
City-St-Zip: Ocala, FL 34471

Title: PTS () Delete
Name: TYLER, SHELLEY
Address: 7101-4 W. ANTOHNY RD
City-St-Zip: Ocala, FL 34479

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTSD (X) Change () Addition
Name: TYLER, SHELLEY
Address: 7101-4 W. ANTHONY RD
City-St-Zip: Ocala, FL 34479

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

Title: PTSD (X) Change () Addition
Name: TYLER, SHELLEY
Address: 7101-4 W. ANTOHNY RD
City-St-Zip: Ocala, FL 34479

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SHELLEY TYLER

PRES

04/01/2005

Electronic Signature of Signing Officer or Director

Date