

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000015757

Entity Name: CLONTS PROPERTIES, INC.

FILED  
Jan 15, 2007  
Secretary of State

## Current Principal Place of Business:

926 N. RIVERHILLS DR.  
TEMPLE TERRACE, FL 33617

## New Principal Place of Business:

926 N. RIVERHILLS DR.  
TEMPLE TERRACE, FL 33617 US

## Current Mailing Address:

926 N. RIVERHILLS DR.  
TEMPLE TERRACE, FL 33617

## New Mailing Address:

926 N. RIVERHILLS DR.  
TEMPLE TERRACE, FL 33617 US

FEI Number: 01-0601512

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CLONTS, JOHN H  
926 N. RIVERHILLS DR.  
TEMPLE TERRACE, FL 33617 US

## Name and Address of New Registered Agent:

CLONTS, CYNTHIA S  
926 N. RIVERHILLS DR.  
TEMPLE TERRACE, FL 33617 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: CYNTHIA S. CLONTS

01/15/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: CLONTS, JOHN H  
Address: 926 N. RIVERHILLS DR  
City-St-Zip: TEMPLE TERRACE, FL 33617

Title: D (X) Delete  
Name: CLONTS, CYNTHIA S  
Address: 926 N. RIVERHILLS DR  
City-St-Zip: TEMPLE TERRACE, FL 33617

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: CLONTS, CYNTHIA S  
Address: 926 N. RIVERHILLS DR  
City-St-Zip: TEMPLE TERRACE, FL 33617 US

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

I hereby certify that the information supplied with this filing does not qualify for the 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CYNTHIA S. CLONTS

D

01/15/2007

Electronic Signature of Signing Officer or Director

Date