

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000105515

FILED
Apr 21, 2009
Secretary of State

Entity Name: MCCLANAN GOLF INSTRUCTIONS INC.

Current Principal Place of Business:

100 OAKMONT LANE
#307
CLEARWATER, FL 33756

New Principal Place of Business:

109 CRESTWOOD LANE
LARGO, FL 33770

Current Mailing Address:

100 OAKMONT LANE
#307
CLEARWATER, FL 33756

New Mailing Address:

109 CRESTWOOD LANE
LARGO, FL 33770

FEI Number: 59-3246877

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCCLANAN MASER, PATRICIA
100 OAKMONT LANE
#307
CLEARWATER, FL 33756 US

Name and Address of New Registered Agent:

MCCLANAN SHRIVER, PATRICIA
109 CRESTWOOD LANE
LARGO, FL 33770 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: PATRICIA MCCLANAN SHRIVER

04/21/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MCLANAN MASER, PATRICIA
Address: 100 OAKMONT LANE #307
City-St-Zip: CLEARWATER, FL 33756

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: MCCLANAN SHRIVER, PATRICIA
Address: 109 CRESTWOOD LANE
City-St-Zip: LARGO, FL 33770

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PATRICIA MCCLANAN SHRIVER

PRES

04/21/2009

Electronic Signature of Signing Officer or Director

Date