

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000090490

Entity Name: CLOVER GROUP INC.

FILED
Apr 20, 2007
Secretary of State

Current Principal Place of Business:

141 E CENTRAL AVE STE 340
WINTER HAVEN, FL 33880

New Principal Place of Business:

141 E CENTRAL AVE STE 300
WINTER HAVEN, FL 33880

Current Mailing Address:

141 E CENTRAL AVE STE 340
WINTER HAVEN, FL 33880

New Mailing Address:

141 E CENTRAL AVE STE 300
WINTER HAVEN, FL 33880

FEI Number: 20-0170875

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARRISON, AUBREY PRES
141 E CENTRAL AVE STE 340
WINTER HAVEN, FL 33880 US

Name and Address of New Registered Agent:

HARRISON, AUBREY PRES
141 E CENTRAL AVE STE 300
WINTER HAVEN, FL 33880 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: AUBREY HARRISON

04/20/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: HARRISON, AUBREY
Address: 141 E CENTRAL AVE STE 340
City-St-Zip: WINTER HAVEN, FL 33880

Title: P () Delete
Name: HARRISON, AUBREY
Address: 141 E CENTRAL AVE STE 340
City-St-Zip: WINTER HAVEN, FL 33880

Title: VP () Delete
Name: HARRISON, KATHLEEN A
Address: 141 E CENTRAL AVE STE 340
City-St-Zip: WINTER HAVEN, FL 33880

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: HARRISON, AUBREY
Address: 141 E CENTRAL AVE STE 300
City-St-Zip: WINTER HAVEN, FL 33880

Title: P (X) Change () Addition
Name: HARRISON, AUBREY
Address: 141 E CENTRAL AVE STE 300
City-St-Zip: WINTER HAVEN, FL 33880

Title: VP (X) Change () Addition
Name: HARRISON, KATHLEEN A
Address: 141 E CENTRAL AVE STE 300
City-St-Zip: WINTER HAVEN, FL 33880

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: AUBREY HARRISON

PRES

04/20/2007

Electronic Signature of Signing Officer or Director

Date