

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000062077

FILED
Apr 23, 2009
Secretary of State

Entity Name: CLIGGOTT MANAGEMENT, INC.

Current Principal Place of Business:

5402 LICK RIVER LANE
GAINESVILLE, VA 20155

New Principal Place of Business:

Current Mailing Address:

5402 LICK RIVER LANE
GAINESVILLE, VA 20155

New Mailing Address:

FEI Number: 20-4155534

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOSEPH C. KEMPE, P.A.
941 NORTH HIGHWAY A1A
JUPITER, FL 33477 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CLIGGOTT, MICHAEL R
Address: 5402 LICK RIVER LANE
City-St-Zip: GAINESVILLE, VA 20155 US

Title: VPD () Delete
Name: CLIGGOTT, RICHARD T SR
Address: 100 BEACH ROAD, APT. 501
City-St-Zip: TEQUESTA, FL 33469 US

Title: VPD () Delete
Name: CLIGGOTT, RICHARD T JR
Address: 55 HIRAM HILL ROAD
City-St-Zip: MONROE, CT 06468 US

Title: TSD () Delete
Name: CLIGGOTT, JANET
Address: 100 BEACH ROAD, APT. 501
City-St-Zip: TEQUESTA, FL 33468 US

Title: D () Delete
Name: KENT, PATRICIA E
Address: RFD 490-A
City-St-Zip: TISBURY, MA 02568 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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: MICHAEL R. CLIGGOTT

PD

04/23/2009

Electronic Signature of Signing Officer or Director

Date