2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000121684

Entity Name: CLEWISTON SUB-MART CORPORATION

FILED Jan 31, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

322 COUNTY RD 721 LOOP 1005 WEST SUGARLAND HIGHWAY

LAKEPORT, FL 33481 CLEWISTON, FL 33440

Current Mailing Address: New Mailing Address:

322 COUNTY RD 721 LOOP 322 COUNTY ROAD 721 LOOP

LAKEPORT, FL 33481 LAKEPORT, FL 33471

FEI Number: 90-0247327 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BENNETT, LORALIE T
322 COUNTY RD 721 LOOP
LAKEPORT, FL 33481 US
BENNETT, LORALIE T
322 COUNTY ROAD 721 LOOP
LAKEPORT, FL 33471 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: LORALIE T BENNETT 01/31/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title:

Name:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

DP () Delete Title: DP (X) Change () Addition BENNETT, TREY W BENNETT, TREY W

 Address:
 322 COUNTY RD 721 LOOP
 Address:
 322 COUNTY ROAD 721 LOOP

 City-St-Zip:
 LAKEPORT, FL 33481
 City-St-Zip:
 LAKEPORT, FL 33471

City-3-21p. LAKEFORT, FE 33461 City-3-21p. LAKEFORT, FE 3347

Title: DVS () Delete Title: DVS (X) Change () Addition
Name: BENNETT LORALIE T Name: BENNETT LORALIE T

 Name:
 BENNETT, LORALIE T
 Name:
 BENNETT, LORALIE T

 Address:
 322 COUNTY RD 721 LOOP
 Address:
 322 COUNTY ROAD 721 LOOP

 City-St-Zip:
 LAKEPORT, FL 33481
 City-St-Zip:
 LAKEPORT, FL 33471

Title: D () Delete Title: () Change () Addition

 Name:
 NASH, TERESA L
 Name:

 Address:
 32117 ORANGE AVE
 Address:

 City-St-Zip:
 FT PIERCE, FL 34945
 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: LORALIE T BENNETT DVS 01/31/2006