## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000035881

**Entity Name: SAWRIGHT CORPORATION** 

FILED May 01, 2008 Secretary of State

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

3515 WADIN HERON TERRACE 2552 WILLOW DROP WAY LIVE OAK RESERVE LIVE OAK RESERVE OVIEDO, FL 32766 OVIEDO, FL 32766

**Current Mailing Address: New Mailing Address:** 

PO BOX 678940 PO BOX 622634 ORLANDO, FL 32867 OVIEDO, FL 32762

FEI Number: 83-0477130 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:

WRIGHT, ASHLEY R ALL CLEAN 642 BURFORD CIRCLE 2552 WILLOW DROP WAY DAVENPORT, FL 33896 US OVIEDO, FL 32766

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: S J WRIGHT 05/01/2008

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title: (X) Change ( ) Addition

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete WRIGHT, ASHLEY R WRIGHT, ASHLEY R Name: Name: 642 BURFORD CIRCLE 2552 WILLOW DROP WAY Address: Address: City-St-Zip: DAVENPORT, FL 33896 City-St-Zip: OVIEDO, FL 32766

( ) Delete Title: VPD Title: VPD (X) Change ( ) Addition Name: WRIGHT, SAMANTHA J Name: WRIGHT, SAMANTHA J

642 BURFORD CIRCLE Address: 2552 WILLOW DROP WAY Address: DAVENPORT, FL 33896 OVIEDO, FL 32766 City-St-Zip: 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: S J WRIGHT **VPD** 05/01/2008