# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Feb 14, 2008**
**Secretary of State**

DOCUMENT# P93000003784

**Entity Name:** KRISTY K. CLEARY, INC.

**Current Principal Place of Business:**

1865 LES CHATEAU BLVD.
SUITE 203
NAPLES, FL 34109

**New Principal Place of Business:**

1865 LES CHATEAUX BLVD.
SUITE 203
NAPLES, FL 34109

**Current Mailing Address:**

1865 LES CHATEAU BLVD.
SUITE 203
NAPLES, FL 34109 US

**New Mailing Address:**

1865 LES CHATEAUX BLVD.
SUITE 203
NAPLES, FL 34109

**FEI Number: 65-0392337** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

ROSSI, NANCY O
1865 LES CHATEAU BLVD.
SUITE 203
NAPLES, FL 34109 US

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

ROSSI, NANCY O
1865 LES CHATEAUX BLVD.
SUITE 203
NAPLES, FL 34109 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: 02/14/2008
Electronic Signature of Registered Agent — Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete
Name: ROSSI, NANCY
Address: 1865 LES CHATEAU BLVD. STE 203
City-St-Zip: NAPLES, FL 34109

Title: VPD ( ) Delete
Name: TIRREL, SHEILA K
Address: 1865 LES CHATEAU BLVD. STE 203
City-St-Zip: NAPLES, FL 34109

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition
Name: ROSSI, NANCY
Address: 1865 LES CHATEAUX BLVD. STE 203
City-St-Zip: NAPLES, FL 34109

Title: VPD (X) Change ( ) Addition
Name: TIRREL, SHEILA K
Address: 1865 LES CHATEAUX BLVD. STE 203
City-St-Zip: NAPLES, FL 34109

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: NANCY O. ROSSI PD 02/14/2008
Electronic Signature of Signing Officer or Director — Date