

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000080925

FILED  
Apr 23, 2008  
Secretary of State

Entity Name: CLAY KING MANAGEMENT CO., INC.

**Current Principal Place of Business:**

700-900 EAST SUNRISE BLVD.  
FORT LAUDERDALE, FL 33304

**New Principal Place of Business:**

**Current Mailing Address:**

700-900 EAST SUNRISE BLVD.  
FORT LAUDERDALE, FL 33304

**New Mailing Address:**

FEI Number: 65-0451441      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

KING, W. CLAY  
700 E. SUNRISE BLVD.  
FT LAUDERDALE, FL 33304      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: KING, W. CLAY  
Address: 700-900 E. SUNRISE BLVD.  
City-St-Zip: FORT LAUDERDALE, FL 33304

Title: VD ( ) Delete  
Name: APPLEBY, ED  
Address: 700-900 E. SUNRISE BLVD.  
City-St-Zip: FORT LAUDERDALE, FL 33304

Title: VTS ( ) Delete  
Name: FRANCIS, KIRK J  
Address: 700-900 E. SUNRISE BLVD.  
City-St-Zip: FORT LAUDERDALE, FL 33304

**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:

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: KIRK FRANCIS

VTS

04/23/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date