

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P93000088640

1. Entity Name  
CLAY MOTOR NEWCO, INC.



FILED

04 MAY 10 AM 11:27

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



04282004 No Chg-P CR2E034 (10/03) 04

4. FEI Number  
65-0457562

Applied For  
Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional  
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

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

DO NOT WRITE  
IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	KING, W. CLAY
STREET ADDRESS	700-900 EAST SUNRISE BLVD.
CITY-ST-ZIP	FORT LAUDERDALE, FL 33304
TITLE	VD
NAME	APPLEBY, ED
STREET ADDRESS	700-900 EAST SUNRISE BLVD.
CITY-ST-ZIP	FORT LAUDERDALE, FL 33304
TITLE	VTS
NAME	FRANCIS, KIRK J
STREET ADDRESS	700-900 EAST SUNRISE BLVD.
CITY-ST-ZIP	FORT LAUDERDALE, FL 33304
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

100037295391  
05/25/04-01057-091- \*\*158.75

DO NOT WRITE  
IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Kirk J. Francis VP 4/29/04*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #