

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000022611

FILED  
Jan 28, 2008  
Secretary of State

Entity Name: THE CLIFTON CORPORATION

## Current Principal Place of Business:

5220 S UNIVERSITY DR STE 211  
FORT LAUDERDALE, FL 33328

## New Principal Place of Business:

## Current Mailing Address:

5220 S UNIVERSITY DR STE 211  
SUITE 201  
FORT LAUDERDALE, FL 33328

## New Mailing Address:

FEI Number: 65-0502072      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

SCHILLINGER, LEE H  
4601 SHERIDAN STREET  
SUITE 202  
HOLLYWOOD, FL 33021 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: DVP ( ) Delete  
Name: PAWLEY, WILLIAM D JR.  
Address: 491 CYPRESS POINTE DRIVE EAST  
City-St-Zip: PEMBROKE PINES, FL 33027

Title: D (X) Delete  
Name: MCKAY, ANNIE H  
Address: 491 CYPRESS PT DR E  
City-St-Zip: HOLLYWOOD, FL 33027

Title: P (X) Delete  
Name: MANSON, ELEANOR L  
Address: 4851 SOUTHWEST 130TH AVENUE  
City-St-Zip: SOUTHWEST RANCHES, FL 33330

Title: DVP (X) Delete  
Name: MCKAY, DOUGLAS  
Address: 4851 SW 130TH AVE  
City-St-Zip: FORT LAUDERDALE, FL 33330

Title: ST (X) Delete  
Name: MCKAY, MARGARET  
Address: 491 CYPRESS PT DR E  
City-St-Zip: HOLLYWOOD, FL 33027

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: MCKAY, DOUGLAS  
Address: 4851 SW 130TH AVE  
City-St-Zip: SUNSHINE RANCHES, FL 33330

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: DOUGLAS MCKAY

P

01/28/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date