## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P94000068465

ORANGE PARK, FL 32073 US

City-St-Zip:

Entity Name: MCCLENDON'S PORTABLE TOILET, INC.

FILED Jul 09, 2008 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
3700 KEEI JACKSON	N RD VILLE, FL 32254	US			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
P O BOX 4 JACKSON	140117 VILLE, FL 32222	US			
FEI Number:	: 59-3283462	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:					
10572 ST / JACKSON The above	HRYLE ANNJ AUGUSTINE RD VILLE, FL 32257 named entity sub of Florida.		ourpose of changing its registere	d office or registered agent, or both,	
SIGNATU	RE:				
	Electronic	Signature of Registered Ag	ent	Date	
Election Car	npaign Financing T	)(b), F.S., the corporation did no rust Fund Contribution ( ).	·	TO TO OFFICERS AND DIDECTORS.	
OFFICER	S AND DIRECTO	PK5:	ADDITIONS/CHANGI	ES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () De MCCLENDON, PA 431 MONTEREY F ORANGE PARK, F	TRICK A SR. PARKWAY	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	VP () De MCCLENDON, PAI 431 MONTEREY F	VIELA M	Title: Name: Address:	() Change () Addition	

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: PAMELA MCCLENDON V.P. 07/09/2008