

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 13, 2006 08:00 AM
Secretary of State

DOCUMENT # P96000038256

1. Entity Name
ST. PETERSBURG CLAY COMPANY, INC.



Principal Place of Business
**420 22ND ST S
SAINT PETERSBURG, FL 33712 US**

Mailing Address
**420 22ND ST S
SAINT PETERSBURG, FL 33712 US**



01032006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3380128

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**KNAUST, WARREN J
2730 CENTRAL AVE
ST PETERSBURG, FL 33712**

**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 _____ (NOTE: Registered Agent signature required when reappointing) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

**000000430058
02/22/06-80034--003 150.00**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-STATE-ZIP	PT COWEN, JAMES S 135 WILDWOOD LANE SE ST PETERSBURG, FL
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	V PARKER, CHARLES L 462 28TH AVE N ST PETERSBURG, FL
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	VP MANNING, RICHARD S 3512 GULF BLVD SAINT PETERSBURG, FL 33706
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	
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TITLE NAME STREET ADDRESS CITY-STATE-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: [Signature] **STAN COWEN** **2/9/06 727-876-2529**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #