## FILE NOW: FILING FEE AFTER MAY 1ST IS: \$550.00

Mailing Address

1275 LAKE HEATHROW LANE

PROFIT CORPORATION ANNUAL REPORT

1999

Principal Place of Business 1275 LAKE HEATHROW LANE



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secreta y of State DIVISION OF CORPORATIONS

## FILED Apr 27, 1999 8:00 am Secretary of State

04-27-1999 90010 010 \*\*\*150.00

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DOCUMENT # P98000081977	
CLAYTON WOODS, INC.	

HEATHROW FL 32746 HEATHROW I'L 32746 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 09/22/1998 2. Principal Place of Business 21 615 CRESCENT EXEC. CT. 26 App ied For 4 FELNumber 2a. Mailing Address Not Applicable Suite, Apt. #, etc. \$8.75 Acditional Suite, Art. #, etc. П 5. Certificate of Status Desired Fee Required SUITE 120 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be LAKE Trust Fund Contribution Added to Fees 28 Country 8. This corporation owes the current year Intangible ☐ Yes Personal Property Tax. 29 30 25 10. Name and Address of New Registere 1 Agent 9. Name and Address of Current Registered Agent BASQUE, JAMES F 82 Street Address (P.O. Box Number is Not Acceptable) 1637 EAST VINE STREET SUITE E KISSIMMEE FL 34744 83 Zip Code 84 City 85 FL 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statules, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or bo h, in the State of Florida. Such change was authorized by the corporation's board of circotors. I hereby accept the appointment as registered agent, am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOT E. Registered Agent signature required when reinstating) Signature, typed or printed na ne of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. U, P, S,T Change ★ Addition ☐ DELETE 11 TITLE TITLE A. WAYNE RICH NAME 912 N. HIGHLAND AVE 13 STREET ADDRESS STREET ADDRESS 32803 ORLANDO, FL 1.4 CITY-ST-ZIP CITY-ST-ZIP Addition DELETE 2.1 TITLE ☐ Change TITLE 22 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2. 4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition □ DELETE 31 TITLE TITLE 3 2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3 4. CITY-ST-ZIP CITY-ST-ZIP Change Addition ☐ DELETE 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP [] Change ☐ Addition DELETE 5.1 TITLE TITLE 52 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP Addition 61 TITLE Change DELETE TITLE NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-\$T-ZIP

14. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.0 '(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP

A. WAYNE Rich Pres.

(11/98)CR2E034