

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000000309

FILED
Jan 28, 2010
Secretary of State

Entity Name: SHACKELFORD, L.C.

Current Principal Place of Business:

3106 81ST COURT EAST
BRADENTON, FL 34212

New Principal Place of Business:

Current Mailing Address:

PO BOX 91
ELLENTON, FL 34222

New Mailing Address:

FEI Number: 65-0975216

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHACKELFORD, BRUCE
3106 81ST COURT EAST
BRADENTON, FL 34212 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

MANAGING MEMBERS/MANAGERS:

Title: PART
Name: SHACKELFORD, BRUCE
Address: PO BOX 91
City-St-Zip: ELLENTON, FL 34222

Title: PART
Name: JAMES, KAREN
Address: 25426 RANCAQUA DR.
City-St-Zip: PUNTA GORDA, FL 33983

Title: PART
Name: SHACKELFORD, GARY L
Address: 7310 15TH AVE. N.W.
City-St-Zip: BRADENTON, FL 34209

Title: PART
Name: SHACKELFORD, LELAND
Address: 3212 COUNTRY RIVER DR.
City-St-Zip: PARRISH, FL 34219

Title: PART
Name: SHACKELFORD, BRENT
Address: PO BOX 91
City-St-Zip: ELLENTON, FL 34222

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: BRUCE SHACKELFORD

PART

01/28/2010

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date