

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000003098

FILED  
Aug 16, 2007  
Secretary of State

Entity Name: BURCHFIELD FINANCIAL SERVICES, LLC

**Current Principal Place of Business:**

4827 CAINS WREN TRAIL  
SANFORD, FL 32771

**New Principal Place of Business:**

**Current Mailing Address:**

4827 CAINS WREN TRAIL  
SANFORD, FL 32771

**New Mailing Address:**

FEI Number: 65-1178753      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

**Name and Address of Current Registered Agent:**

REID, THOMAS B SR  
721 VERONA ST  
SUITE 1-B  
KISSIMMEE, FL 34741 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: MGRM ( ) Delete  
Name: REID, THOMAS B SR  
Address: 3555 SUNSET ISLES BLVD  
City-St-Zip: KISSIMMEE, FL 34747

Title: MGR ( ) Delete  
Name: DEIBLER, MICHOLE A  
Address: 3555 SUNSET ISLES BLVD  
City-St-Zip: KISSIMMEE, FL 34746

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: REID, THOMAS B SR  
Address: 4827 CAINS WREN TRAIL  
City-St-Zip: SANFORD, FL 32771

Title: MGR (X) Change ( ) Addition  
Name: DEIBLER, MICHOLE A  
Address: 4827 CAINS WREN TRAIL  
City-St-Zip: SANFORD, FL 32771

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 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: THOMAS B REID

MGRM

08/16/2007

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