

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000108691

Entity Name: CLAY SIDING & SOFFIT LLC

Current Principal Place of Business:

890 GREENWOOD AVE.
ORANGE CITY, FL 32763

Current Mailing Address:

890 GREENWOOD AVE.
ORANGE CITY, FL 32763

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CLAY, JACOB
890 GREENWOOD AVE.
ORANGE CITY, FL 32763 US

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

Authorized Person(s) Detail :

Title MGRM
Name CLAY, WILLIAM
Address 890 GREENWOOD AVE.
City-State-Zip: ORANGE CITY FL 32763

I hereby 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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: WILLIAM CLAY

MGRM

04/26/2015

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date