2007 Limited LIABILITY COMPANY ANNUAL REPORT

FILED
May 21, 2007 8:00 am
Secretary of State
05-21-2007 90363 030 ****50.00

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1. Entity Name
DOT CLAY LIMITED LIABILITY COMPANY

Principal Place of Business
12515 LAKE BUYNAK CT.
WINDERMERE, FL 34786

Mailing Address
12515 LAKE BUYNAK CT.
WINDERMERE, FL 34786

40117371

04282006 No Chg-LLC CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
41-2047518

Applied For
Not Applicable

5. Certificate of Status Desired ☐ $5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

LYONS, DOUGLAS SCOTT
325 NORTH CALHOUN ST.
TALLAHASSEE, FL 32301

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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
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $50.00
Due by May 1, 2006 7

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	HAWTHORNE, CHARLES JR.
STREET ADDRESS	12515 LAKE BUYNAK CT.
CITY-ST-ZIP	WINDERMERE, FL 34786
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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11. 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 is true and accurate and that my 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: [signature] 5/14/07 (321) 948-0808
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE DATE Daytime Phone #