

**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 23, 2004 8:00 am
Secretary of State

03-23-2004 90069 014 ****50.00

DOCUMENT # L02000030247

1. Entity Name

MCCLELLAND, JONES, LYONS & LACEY, L.C.



Principal Place of Business

1901 S. HARBOR CITY BLVD., SUITE 500
MELBOURNE, FL 32901

Mailing Address

1901 S. HARBOR CITY BLVD., SUITE 500
MELBOURNE, FL 32901

DO NOT WRITE IN THIS SPACE



01052004 No Chg-LLC

CR2E083 (10/03)

4. FEI Number

06-1657177

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

-6. Name and Address of Current Registered Agent

MCCLELLAND, CLIFTON A JR.
1901 S. HARBOR CITY BLVD., SUITE 500
MELBOURNE, FL 32901

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IN THIS SPACE**

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

Clifton A. Jr.
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

1/6/2004

**Filing Fee is \$50.00
Due by May 1, 2004**

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	MCCLELLAND, CLIFTON A JR
STREET ADDRESS	1901 S. HARBOR CITY BLVD., SUITE 500
CITY-ST-ZIP	MELBOURNE, FL 32901
TITLE	MGR
NAME	JONES, HARRY A
STREET ADDRESS	1901 S. HARBOR CITY BLVD., SUITE 500
CITY-ST-ZIP	MELBOURNE, FL 32901
TITLE	MGR
NAME	LYONS, AARON D
STREET ADDRESS	1901 S. HARBOR CITY BLVD., SUITE 500
CITY-ST-ZIP	MELBOURNE, FL 32901
TITLE	MGR
NAME	Lacey, Stephen
STREET ADDRESS	1901 S. Harbor City Blvd, Suite 500
CITY-ST-ZIP	Melbourne, FL 32901
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
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 exemption stated in Section 119.07(3)(i), 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:

Clifton A. McClelland Jr.

1-6-2004

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #