

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 18, 2008 08:00 A
Secretary of State

DOCUMENT # L03000047771
 1. Entity Name
 CLECKNER COMM, LLC



Principal Place of Business Mailing Address
 553 JEFFERSON HEIGHTS ROAD 553 JEFFERSON HEIGHTS ROAD
 MONTICELLO, FL 32344 US MONTICELLO, FL 32344 US

DO NOT WRITE IN THIS SPACE



03132008No Chg-LLC CR2E083 (12/07)

4. FEI Number 20-0440937	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent
 CLECKNER, DALE J SR
 553 JEFFERSON HEIGHTS ROAD
 MONTICELLO, FL 32344

DO NOT WRITE 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

U00000862623
 04/03/08-80055-020 138.75

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR CLECKNER, DALE J SR 553 JEFFERSON HEIGHTS ROAD MONTICELLO, FL 32344
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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: Dale J. Cleckner 03/14/08

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #