

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000020499

**FILED**  
**Jan 09, 2006**  
**Secretary of State**

**Entity Name:** MIDDLETON CLOTHIERS L.L.C.

**Current Principal Place of Business:**

5287 COMMERCE ST.  
JAY, FL 32565

**New Principal Place of Business:**

4847 WEST SPENCERFIELD ROAD  
PACE, FL 32571

**Current Mailing Address:**

P.O. BOX 567  
JAY, FL 32565

**New Mailing Address:**

**FEI Number:** 59-3448029

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MIDDLETON, MAROLYN  
5287 COMMERCE ST.  
JAY, FL 32565 US

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

MIDDLETON, MAROLYN  
4847 WEST SPENCERFIELD ROAD.  
PACE, FL 32571 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: MAROLYN MIDDLETON

01/09/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: MIDDLETON, MAROLYN  
Address: P.O. BOX 567  
City-St-Zip: JAY, FL 32565

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: MAROLYN MIDDLETON

MGR

01/09/2006

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