

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 11, 2007 8:00 am
Secretary of State

05-11-2007 90196 034 ****55.00

DOCUMENT # L04000058362						
1. Entity Name CLAYTONS' REALTY, LLC						
Principal Place of Business 5405 DIPLOMAT CIRCLE, SUITE 100 ORLANDO, FL 32810			Mailing Address 5405 DIPLOMAT CIRCLE, SUITE 100 ORLANDO, FL 32810			
2. Principal Place of Business - No P.O. Box #		3. Mailing Address				
Suite, Apt. #, etc.		Suite, Apt. #, etc.				
City & State		City & State				
Zip	Country	Zip	Country	4. FEI Number 20-2103360		
				Applied For Not Applicable		
				5. Certificate of Status Desired ☒ \$5.00 Additional Fee Required		
6. Name and Address of Current Registered Agent CLAYTON, KENNETH M ESQ. C/O CLAYTON & MCCULLOH 1065 MAITLAND CENTER COMMONS BLVD. MAITLAND, FL 32751			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code			
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 _____						
Filing Fee is \$50.00 Due by May 1, 2007		Make check payable to Florida Department of State				
9. MANAGING MEMBERS/MANAGERS				10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MALCOLM, CLAYTON W 3405 DIPLOMAT CIRCLE STE 100 ORLANDO, FL 32810			☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
				☒ Change ☐ Addition	MGR CLAYTON, W. MALCOLM 5405 DIPLOMAT CIRCLE, STE 100 ORLANDO, FL 32810	
				☐ Change ☐ Addition		
				☐ Change ☐ Addition		
				☐ Change ☐ Addition		
				☐ Change ☐ Addition		
				☐ Change ☐ Addition		
				☐ Change ☐ Addition		
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: <i>W. Malcolm Clayton</i>				W. MALCOLM CLAYTON, MANAGER		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE				Date: 4-24-2007 Daytime Phone #: 407.644-6200		

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