

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000091538

Entity Name: CLIFFORD LLC

FILED
Apr 17, 2007
Secretary of State

Current Principal Place of Business:

4400 N. HIGHWAY 19-A
SUITE #6
MOUNT DORA, FL 32757 US

New Principal Place of Business:

3760 N HIGHWAY 19A
MOUNT DORA, FL 32757 US

Current Mailing Address:

4400 N. HIGHWAY 19-A
SUITE #6
MOUNT DORA, FL 32757 US

New Mailing Address:

3760 N HIGHWAY 19A
MOUNT DORA, FL 32757 US

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PARADIS, DEBRA
4400 N. HIGHWAY 19-A
SUITE 6
MOUNT DORA, FL 32757 US

Name and Address of New Registered Agent:

PARADIS, DEBRA
3760 N HIGHWAY 19A
MOUNT DORA, FL 32757 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:

04/17/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: PARADIS, DEBRA
Address: 4400 N. HIGHWAY 19-A, SUITE 6
City-St-Zip: MOUNT DORA, FL 32757

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: PARADIS, DEBRA
Address: 3760 N HIGHWAY 19A
City-St-Zip: MOUNT DORA, FL 32757

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: DEBRA PARADIS

MGRM

04/17/2007

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