

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000110369

FILED
Jan 06, 2009
Secretary of State

Entity Name: MACBARNEY SPLICING, LLC

Current Principal Place of Business:

3408 LITTLE OAK STREET
VALRICO, FL 33594 US

New Principal Place of Business:

3408 LITTLE OAK STREET
VALRICO, FL 33596 US

Current Mailing Address:

3408 LITTLE OAK STREET
VALRICO, FL 33594 US

New Mailing Address:

3408 LITTLE OAK STREET
VALRICO, FL 33596 US

FEI Number: 20-8038408

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCCLUSKEY, MICHAEL C
3408 LITTLE OAK STREET
LITHIA, FL 33594 US

Name and Address of New Registered Agent:

MCCLUSKEY, MICHAEL C
3408 LITTLE OAK STREET
LITHIA, FL 33596 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: MICHAEL C MCCLUSKEY

01/06/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: MCCLUSKEY, MICHAEL C
Address: 3408 LITTLE OAK STREET
City-St-Zip: VALRICO, FL 33594 US

Title: MGR () Delete
Name: BARNES, DAVID
Address: 2838 N VALRICO ROAD
City-St-Zip: SEFFNER, FL 33584 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: MCCLUSKEY, MICHAEL C
Address: 3408 LITTLE OAK STREET
City-St-Zip: VALRICO, FL 33596 US

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

I hereby certify that the information supplied with this filing does not qualify 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: MICHAEL C MCCLUSKEY

MGR

01/06/2009

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