

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000090931

**FILED**  
**Feb 18, 2010**  
**Secretary of State**

**Entity Name:** CLCT SPECIALTIES, LLC.

**Current Principal Place of Business:**

1038 LAKESHORE RANCH DR  
SEFFNER, FL 33584

**New Principal Place of Business:**

5204 DOWNING STREET  
DOVER, FL 33527

**Current Mailing Address:**

1038 LAKESHORE RANCH DR  
SEFFNER, FL 33584

**New Mailing Address:**

5204 DOWNING STREET  
DOVER, FL 33527

**FEI Number:** 26-0850150

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

COLANTONIO, LAWRENCE  
1038 LAKESHORE RANCH DR  
SEFFNER, FL 33584 US

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

COLANTONIO, LAWRENCE  
5204 DOWNING STREET  
DOVER, FL 33527 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:

02/18/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: COLANTONIO, LAWRENCE  
Address: 5204 DOWNING STREET  
City-St-Zip: DOVER, FL 33527

I hereby 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: LAWRENCE COLANTONIO

MGR

02/18/2010

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