

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000095858

FILED
Jan 11, 2009
Secretary of State

Entity Name: BUFORD BUILDINGS, L.L.C.

Current Principal Place of Business:

11245 4 ST E
SAINT PETERSBURG, FL 33706

New Principal Place of Business:

Current Mailing Address:

11245 4 ST E
SAINT PETERSBURG, FL 33706

New Mailing Address:

FEI Number: 41-2258228

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GASSMAN, ALAN S
1245 COURT STREET
SUITE 102
CLEARWATER, FL 33756 US

Name and Address of New Registered Agent:

BUSINESS TO SERVE AS RA
6985 FIRST AVENUE NORTH
ST. PETERSBURG, FL 33710 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: EDWARD SEIFRIED

01/11/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: SEIFRIED, E. WAYNE JR.
Address: 6985 FIRST AVENUE NORTH
City-St-Zip: ST. PETERSBURG, FL 33710

Title: MGR () Delete
Name: SEIFRIED, EDWARD
Address: 6985 FIRST AVENUE NORTH
City-St-Zip: ST. PETERSBURG, FL 33710

Title: MGR () Delete
Name: BAHL, ROY
Address: 6985 FIRST AVENUE NORTH
City-St-Zip: ST. PETERSBURG, FL 33710

ADDITIONS/CHANGES:

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

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

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: EDWARD SEIFRIED

MGR

01/11/2009

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