

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000111067

**FILED**  
**Apr 29, 2010**  
**Secretary of State**

**Entity Name:** CLP MANAGEMENT SERVICES, LLC

**Current Principal Place of Business:**

4250 ALAFAYA TRAIL  
STE. 212-322  
OVIEDO, FL 32765

**New Principal Place of Business:**

3871 INDIAN TRAIL  
6-D  
DESTIN, FL 32541

**Current Mailing Address:**

4250 ALAFAYA TRAIL  
STE. 212-322  
OVIEDO, FL 32765

**New Mailing Address:**

3871 INDIAN TRAIL  
6-D  
DESTIN, FL 32541

**FEI Number:** 26-1411586

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SMALL BUSINESS RESOURCES USA, INC.  
1601 PARK CENTER DRIVE  
SUITE 6A  
ORLANDO, FL 32835 US

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

PULLIAS, CARRIE L  
3871 INDIAN TRAIL  
6-D  
DESTIN, FL 32541 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: CARRIE PULLIAS

04/29/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: PULLIAS, CARRIE L  
Address: 3871 INDIAN TRAIL, 6-D  
City-St-Zip: DESTIN, FL 32541

Title: MGRM  
Name: PULLIAS, DAMON H  
Address: 3871 INDIAN TRAIL, 6-D  
City-St-Zip: DESTIN, FL 32541

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: CARRIE PULLIAS

MGRM

04/29/2010

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