

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000053502

FILED  
May 15, 2010  
Secretary of State

Entity Name: CLEM'S CHOICE, LLC

**Current Principal Place of Business:**

3317 W SAN JUAN ST  
TAMPA, FL 33629

**New Principal Place of Business:**

**Current Mailing Address:**

3317 W SAN JUAN ST  
TAMPA, FL 33629

**New Mailing Address:**

FEI Number: 26-2761113      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

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

LINDSAY, CHRISTINE N  
3317 W SAN JUAN ST  
TAMPA, FL 33629      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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: CHRISTINE & ANDREW LINDSAY  
Address: 3317 W SAN JUAN ST  
City-St-Zip: TAMPA, FL 33629

Title: MGRM  
Name: MARTHA P LOWE TRUST  
Address: P O BOX 1898  
City-St-Zip: FLAGLER BEACH, FL 32136

Title: MGRM  
Name: NYCZ, DIANE  
Address: 4125 NW 67TH TERR  
City-St-Zip: GAINESVILLE, FL 32606

Title: MGRM  
Name: LOWE, VALERIE  
Address: 1215 PRATER LN  
City-St-Zip: TOWNVILLE, SC 29689

Title: MGRM  
Name: TILLMAN, KATHRYN  
Address: 1215 PRATER LN  
City-St-Zip: TOWNVILLE, SC 29689

Title: MGRM  
Name: CLARENCE & ELLEN LOWE  
Address: 1918 SW 175TH AVE  
City-St-Zip: MIRAMAR, FL 33029

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: CHRISTINE LINDSAY

MGM

05/15/2010

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