

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000038090

Entity Name: BYFORD & CLONINGER, LLC

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

**Current Principal Place of Business:**

9880 NW 10TH COURT  
PLANTATION, FL 33322 US

**New Principal Place of Business:**

**Current Mailing Address:**

9880 NW 10TH COURT  
PLANTATION, FL 33322 US

**New Mailing Address:**

FEI Number: 26-4743659

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CLONINGER, PAT B MANAGER  
9880 NW 10TH COURT  
PLANTATION, FL 33322 US

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

CLONINGER, PAT B MEMBER  
9880 NW 10TH COURT  
PLANTATION, FL 33322 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: PAT CLONINGER

01/18/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: CLONINGER, PATRICIA B  
Address: 9880 NW 10TH COURT  
City-St-Zip: PLANTATION, FL 33322 US

Title: MGRM  
Name: CLONINGER, LEWIS D JR.  
Address: 9880 NW 10TH COURT  
City-St-Zip: PLANTATION, FL 33322 US

Title: MGRM  
Name: BYFORD, STEVEN A  
Address: 1 MABBOTTS TRADEWORTH SURREY  
City-St-Zip: KT20 5TS UNITED KINGDOM, L

Title: MGRM  
Name: BYFORD, VIRGINIA T  
Address: 1 MABBOTTS TRADEWORTH SURREY  
City-St-Zip: KT20 5TS UNITED KINGDOM,

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: PAT CLONINGER

MGRM

01/18/2010

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