

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000117857

**FILED**  
**Mar 02, 2012**  
**Secretary of State**

**Entity Name:** BULLARD FENCE AND SUPPLY LLC

**Current Principal Place of Business:**

9943 BEACH BLVD  
STE B  
JACKSONVILLE, FL 32246

**New Principal Place of Business:**

**Current Mailing Address:**

9943 BEACH BLVD  
STE B  
JACKSONVILLE, FL 32246

**New Mailing Address:**

**FEI Number:** 45-3599542

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CONLEY, MICHAEL T  
9943 BEACH BLVD  
JACKSONVILLE, FL 32246 US

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

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:** MGR  
**Name:** CONLEY, MICHAEL T  
**Address:** 9943 BEACH BLVD  
**City-St-Zip:** JACKSONVILLE, FL 32246 US

**Title:** MGR  
**Name:** BULLARD, JOSEPH S  
**Address:** 11574 WYNNFIELD LAKES CIR  
**City-St-Zip:** JACKSONVILLE, FL 32246 US

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:** MICHAEL CONLEY

MGR

03/02/2012

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