

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000022220

**Entity Name:** MICHAEL CLAYTON ENTERPRISES, LLC

**Current Principal Place of Business:**

5004 E FOWLER AVE  
STE C #314  
TAMPA , FL 33617-2181

**Current Mailing Address:**

5004 E FOWLER AVE  
STE C #314  
TAMPA , FL 33617-2181 US

**FEI Number:** 20-1179563

**Certificate of Status Desired:** No

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

CLAYTON, MICHAEL  
5004 E FOWLER AVE  
STE C #314  
TAMPA , FL 33617-2181 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

**Authorized Person(s) Detail :**

Title	MGR	Title	MGR
Name	CLAYTON, MICHAEL	Name	GWENDOLYN, CLAYTON
Address	5004 E FOWLER AVE STE C #314	Address	5004 E FOWLER AVE STE C #314
City-State-Zip:	TAMPA FL 33617-2181	City-State-Zip:	TAMPA FL 33617-2181

*I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** MICHAEL CLAYTON

**MANAGER**

**05/01/2018**

Electronic Signature of Signing Authorized Person(s) Detail

Date