

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000010693

FILED
Apr 28, 2008
Secretary of State

Entity Name: MID FLORIDA LAWN CARE, LLC

Current Principal Place of Business:

4141 MOURNING DOVE CT.
MELBOURNE, FL 32934 US

New Principal Place of Business:

4141 MOURNING DOVE CT.
MELBOURNE, FL 329348523 US

Current Mailing Address:

4141 MOURNING DOVE CT.
MELBOURNE, FL 32934 US

New Mailing Address:

4141 MOURNING DOVE CT.
MELBOURNE, FL 329348523 US

FEI Number: 51-0494732

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRUNN, FRANK
407 EAST NEW HAVEN AVENUE
MELBOURNE, FL 329014507 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: MGRM () Delete
Name: DALESSANDRO, ANTHONY F
Address: 4141 MOURNING DOVE CT.
City-St-Zip: MELBOURNE, FL 32934 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: DALESSANDRO, ANTHONY F
Address: 4141 MOURNING DOVE CT.
City-St-Zip: MELBOURNE, FL 329348523 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: FRANK BRUNN

RA

04/28/2008

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