

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 12, 2007 08:00 A
Secretary of State

DOCUMENT # L00000008550

1. Entity Name
STATEWIDE HARVESTING & HAULING, L.L.C.



Principal Place of Business
**300 S.R. 17 SOUTH
LAKE HAMILTON, FL 33851**

Mailing Address
**P. O. BOX 127
LAKE HAMILTON, FL 33851-0127**



03082007 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3666466

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$5.00** Additional
Fee Required

6. Name and Address of Current Registered Agent

**MARONE, JON F
111 FIRST STREET NORTH
DUNDEE, FL 33838**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
RUBUSH, JACK E
723 MAIN STREET
LAKE HAMILTON, FL 33851**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
LESLEY, JOHN T JR
804 S WOODLYN DRIVE
TAMPA, FL 33609**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
MCKINLEY, MALCOLM
211 S. LAKE STARR BLVD
LAKE WALES, FL 33853**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**SEC
CALLAHAM, STEVEN B
2823 SEQUOYAH DRIVE
HAINES CITY, FL 33844**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PRES
BISHOP, FRANCIS R II
1139 SHADY COVE EAST
HAINES CITY, FL 33844**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

U000000662606
03/21/07-80020-007 50.00

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:

Francis R. Bishop II

03-08-07

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

Francis R. Bishop II