

# **2005 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L02000019264

**FILED**  
**May 06, 2005**  
**Secretary of State**

**Entity Name:** PRECISION EXPRESS LAWN CARE, LLC

**Current Principal Place of Business:**

PO BOX 876  
LABELLE, FL 33935

**New Principal Place of Business:**

1400 UTE ST  
LABELLE, FL 33935

**Current Mailing Address:**

1400 UTE ST.  
LABELLE, FL 33935

**New Mailing Address:**

P.O BOX 876  
LABELLE, FL 33975

**FEI Number:** 05-0524213      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

GONZALEZ, DINORA B  
1400 UTE ST  
LABELLE, FL 33935      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/MEMBERS:**

Title: MGR      ( ) Delete  
Name: GONZALEZ, DINORA B  
Address: PO BOX 876  
City-St-Zip: LABELLE, FL 33975

**ADDITIONS/CHANGES:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: DINORA B. GONSALES

OWNE

05/06/2005

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