

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000008574

FILED
Jan 19, 2004
Secretary of State

Entity Name: GREEN LABEL LANDSCAPING LLC

Current Principal Place of Business:

7425 169 DRIVE
LIVE OAK, FL 32060

New Principal Place of Business:

Current Mailing Address:

PO BOX 351383
PALM COAST, FL 32135

New Mailing Address:

FEI Number: 61-1446663 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

TOWLES, JASON
206 LONDON DRIVE
PALM COAST, FL 32137 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: MGRM () Delete
Name: TOWLES, JASON
Address: 206 LONDON DRIVE
City-St-Zip: PALM COAST, FL 32137

Title: MGRM () Delete
Name: COOK, JONATHAN
Address: 206 LONDON DRIVE
City-St-Zip: PALM COAST, FL 32137

Title: MGRM () Delete
Name: TOWLES, SHANNON
Address: 206 LONDON DRIVE
City-St-Zip: PALM COAST, FL 32137

ADDITIONS/CHANGES:

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

Title: MGRM (X) Change () Addition
Name: MADISON, JONATHAN
Address: 206 LONDON DRIVE
City-St-Zip: PALM COAST, FL 32137

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: JASON M. TOWLES

MGRM

01/19/2004

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