2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 05, 2006 08:00 AM
Secretary of State

DOCUMENT # L03000045029

1. Entity Name
BURGESS CUSTOM IRRIGATION AND LANDSCAPING LLC

Principal Place of Business	Mailing Address
5817 ESTHER TERRACE CRESTVIEW, FL 32539	5817 ESTHER TERRACE CRESTVIEW, FL 32539

DO NOT WRITE IN THIS SPACE

03312006No Chg-LLC CR2E083 (11/05)

4. FEI Number
20-0560941
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

BURGESS, PATRICK J
5817 ESTHER TERRACE
CRESTVIEW, FL 32539

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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, 2006

9.	MANAGING MEMBERS/MANAGERS
TITLE	MGR
NAME	BURGESS, PATRICK J
STREET ADDRESS	5817 ESTHER TERRACE
CITY-ST-ZIP	CRESTVIEW, FL 32539
TITLE	MGRM
NAME	BURGESS, PATRICIA
STREET ADDRESS	5817 ESTHER TERRACE
CITY-ST-ZIP	CRESTVIEW, FL 32539
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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NAME	
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CITY-ST-ZIP	

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04/19/06-80085-011 50.00

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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: _____ 4-3-06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #