


**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 23, 2005 08:00 AM
Secretary of State

DOCUMENT # L03000047097 1. Entity Name BERNARD WALKER LANDSCAPING, LLC	
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Principal Place of Business 25 S.W. 264TH ST NEWBERRY, FL 32669	Mailing Address 25 S.W. 264TH ST NEWBERRY, FL 32669
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DO NOT WRITE IN THIS SPACE



02032005No Chg-LLC CR2E083 (10/03)

4. FEI Number 20-0423969	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent BOONE, SAM W 605 N.E. FIRST ST., STE. E GAINESVILLE, FL 32601	DO NOT WRITE IN THIS SPACE
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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 _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>	(NOTE: Registered Agent signature required when reinstating)	DATE _____
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**Filing Fee is \$50.00
Due by May 1, 2005**

U00000273824
03/23/05-80043-012 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM WALKER, BERNARD 25 SW 264TH ST NEWBERRY, FL 32669
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM WALKER, CATHY 25 SW 264TH ST NEWBERRY, FL 32669
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: Bernard Walker Bernard Walker 3/2/05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #