

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Feb 01, 2008 08:00 AM
Secretary of State

DOCUMENT # L03000055859 1. Entity Name NEWSOME LAND CLEARING, LLC	
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Principal Place of Business 1048 STRIMENOS LANE LEESBURG, FL 34748 US	Mailing Address 1048 STRIMENOS LANE LEESBURG, FL 34748 US
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DO NOT WRITE IN THIS SPACE



01152008No Chg-LLC CR2E083 (12/07)

4. FEI Number 16-1696285	Applied For Not Applicable
5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent

**STRIMENOS, PETER T
1048 STRIMENOS LANE
LEESBURG, FL 34748**

**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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

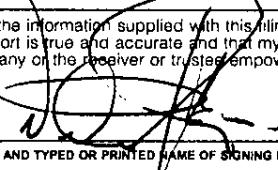
U00000810771
02/08/08-80078-013 138.75

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM STRIMENOS, PETER T 1048 STRIMENOS LANE LEESBURG, FL 34748
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR NEWSOME, JOHN 33319 CR 468 LEESBURG, FL 34748
TITLE NAME STREET ADDRESS CITY-ST-ZIP	M NEWSOME, SCOTT 33319 CR 468 LEESBURG, FL 34748
TITLE NAME STREET ADDRESS CITY-ST-ZIP	M NEWSOME, MARK 33319 CR 468 LEESBURG, FL 34748
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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:  **1-20-08**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #