

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000000612

FILED
Jul 15, 2007
Secretary of State

Entity Name: MEADOWS EXTERIOR CLEANING LLC

Current Principal Place of Business:

33 RIDGEWAY CT
CRAWFORDVILLE, FL 32327

New Principal Place of Business:

Current Mailing Address:

33 RIDGEWAY CT
CRAWFORDVILLE, FL 32327

New Mailing Address:

FEI Number: 13-4220013 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:

JONES, GREGORY A
33 RIDGEWAY CT
CRAWFORDVILLE, FL 32327 US

Name and Address of New Registered Agent:

JONES, GREG A
33 RIDGEWAY CT
CRAWFORDVILLE, FL 32327 US

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: GREG A JONES

07/15/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: JONES, GREGORY A
Address: 33 RIDGEWAY
City-St-Zip: CRAWFORDVILLE, FL 32327

Title: MGRM () Delete
Name: MEADOWS, RICHARD J
Address: 4378 CRIPPLE CREEK
City-St-Zip: TALLAHASSEE, FL 32309

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: JONES, GREG A
Address: 33 RIDGEWAY
City-St-Zip: CRAWFORDVILLE, FL 32327

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: GREG A JONES

MGRM

07/15/2007

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