

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000010727

FILED
Jan 03, 2007
Secretary of State

Entity Name: ONE SOURCE LANDSCAPE SUPPLY L.L.C.

Current Principal Place of Business:

5550 NORTH US 1
MELBOURNE, FL 32940

New Principal Place of Business:

4600 N US 1
MELBOURNE, FL 32935 US

Current Mailing Address:

5550 NORTH US 1
MELBOURNE, FL 32940

New Mailing Address:

4600 NORTH US 1
MELBOURNE, FL 32935

FEI Number: 20-0712839

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCNAMEE, JOHN
340 TUSCANY WAY, APT 104
MELBOURNE, FL 32940 US

Name and Address of New Registered Agent:

MCNAMEE, JOHN E
1310 MORGAN CT
MELBOURNE, FL 32934 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: LAURIE MCNAMEE

01/03/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: MCNAMEE, JOHN
Address: 340 TUSCANY WAY, APT 104
City-St-Zip: MELBOURNE, FL 32940

Title: MGRM () Delete
Name: MCNAMEE, LAURIE
Address: 340 TUSCANY WAY, APT 104
City-St-Zip: MELBOURNE, FL 32940

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: MCNAMEE, JOHN E
Address: 1310 MORGAN CT
City-St-Zip: MELBOURNE, FL 32934 US

Title: MGRM (X) Change () Addition
Name: MCNAMEE, LAURIE R
Address: 1310 MORGAN CT
City-St-Zip: MELBOURNE, FL 32934

I hereby certify that the information supplied with this filing does not qualify for the 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: LAURIE MCNAMEE

MGRM

01/03/2007

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