2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000022966

City-St-Zip:

Entity Name: LEWIS BROTHERS TREE SERVICE, LLC

FILED May 07, 2007 Secretary of State

Current Principal Place of Business:		New Principal Plac	New Principal Place of Business:	
	COGEE RD MENT, FL 32533			
Current Mailing Address:		New Mailing Addre	New Mailing Address:	
	COGEE RD MENT, FL 32533			
In accordan	: 20-0898769 FEI Number Applied For () ce with s. 607.193(2)(b), F.S., the limited liability (
Name and	Address of Current Registered Agent:	Name and Address	of New Registered Agent:	
1740 MÚS CANTONN	DRNELIUS R COGEE RD MENT, FL 32533 US named entity submits this statement for th	e purpose of changing its registe	red office or registered agent, or both	
	e of Florida.	- -		
SIGNATUF	SE.			
0.0.0.	Electronic Signature of Registered A	Agent	Date	
MANAGING MEMBERS/MANAGERS:		ADDITIONS/CHANGES:	ADDITIONS/CHANGES:	
Title: Name: Address: City-St-Zip:	MGRM () Delete LEWIS, CORNELIUS R 1740 MUSCOGEE RD CANTONMENT, FL 32533	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	MGR (X) Delete PAINTER, JOHN D 4916 BIRCH AVE PENSACOLA, FL 32507	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	MGR (X) Delete WHITE, FRED D 415 WELLINE RD CANTONMENT, FL 32533	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	() Delete	Title: MGR Name: SNYDER Address: 5395 HW		

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.

City-St-Zip: MOLINO, FL 32577

SIGNATURE: CORNELIUS R. LEWIS MGR 05/07/2007