

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000036435

FILED  
May 23, 2005  
Secretary of State

**Entity Name:** PICTURE PERFECT LANDSCAPING, LLC

**Current Principal Place of Business:**

1432 PELICAN BAY TRAIL  
WINTER PARK, FL 32792

**New Principal Place of Business:**

**Current Mailing Address:**

1432 PELICAN BAY TRAIL  
WINTER PARK, FL 32792

**New Mailing Address:**

FEI Number: 16-1699927      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:**

**Name and Address of New Registered Agent:**

BARKMAN, KEVIN  
603 MAIN STREET  
WINDERMERE, FL 34789      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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGR      ( ) Delete  
Name: SMITH, JOSHUA  
Address: 3074 WHISPER LAKE LANE #E  
City-St-Zip: WINTER PARK, FL 32792

Title: MGR      (X) Delete  
Name: CUNNINGHAM, RYAN  
Address: 3516 JERICO DRIVE  
City-St-Zip: CASSELBERRY, FL 32707

**ADDITIONS/CHANGES:**

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JOSHUA M SMITH

MGR

05/23/2005

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