


**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT.**

FILED
Jan 14, 2008 08:00 AM
Secretary of State

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| DOCUMENT # L04000037880 1. Entity Name THE EXSPIRT LAWN SPRINKLER SYSTEMS L.L.C. |  |
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| Principal Place of Business 551 HASOCK LOOP LAKE MARY, FL 32746 | Mailing Address 551 HASOCK LOOP LAKE MARY, FL 32746 |
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01062008 No Chg-LLC

CR2E083 (12/07)

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| 4. FEI Number 01-0827704 | Applied For <input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$5.00 Additional Fee Required |

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| 6. Name and Address of Current Registered Agent WHITE, DAVID B 551 HASOCK LOOP LAKE MARY, FL 32746 |
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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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

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| FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 | U000000784843 01/16/08-80070-020 138.75 |
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| 9. MANAGING MEMBERS/MANAGERS | |
|--|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGRM WHITE, DAVID B 551 HASOCK LOOP LAKE MARY, FL 32746 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGRM WHITE, BETH A 551 HASOCK LOOP LAKE MARY, FL 32746 |
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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: 
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

11/7/08 **407 321 8304**
Date Daytime Phone #