### 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

#### **DOCUMENT # L04000047499**

1. Entity Name
SHAWS LAND CLEARING, LLC



FILED
Mar 05, 2008 08:00 Al
Secretary of State

Principal Place of Business

Mailing Address .

2762 WEST BEAVER STREET JACKSONVILLE, FL 32254

2762 WEST BEAVER STREET JACKSONVILLE, FL 32254



02222008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number	Applied For
04-3794447	 Not Applicable
5. Certificate of Status Desired	\$5.00 Additional Fee Required

### DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

NORMAN P. FREEDMAN, P.A. 525 NORTH NEWNAN STREET JACKSONVILLE, FL 32202

## DO NOT WRITE IN THIS SPACE

	ove named entity submits this statement for the purpose of cha gations of registered agent.		in the State of Florida. I am familiar with, and accept	
SIGNATUR	RE	(NOTE: Registered Agent signature required when reinstating)	DATE	
FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75				
9.	MANAGING MEMBERS/MANAGERS			

MGR TITLE . SHAW, HOWARD R NAME 2762 WEST BEAVER STREET STREET ADDRESS JACKSONVILLE, FL 32254 CITY-ST-7IP MILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS

U00000848362 03/20/08-80014-013 138.75

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11. I hereby certify that the information supplied with this filling 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 trusted empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

CITY-ST-ZP

D TYPED ON PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTAT

32.08

904 387-180

Daytims Phone #