

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000052877

FILED
Apr 28, 2005
Secretary of State

Entity Name: DREAM LAWN & LANDSCAPE, L.L.C.

Current Principal Place of Business:

5625 LAKELAND HIGHLANDS RD.
LAKELAND, FL 33813

New Principal Place of Business:

816 SAGAMORE STREET
LAKELAND, FL 33803

Current Mailing Address:

P.O. BOX 7337
LAKELAND, FL 33807

New Mailing Address:

FEI Number: 59-3740244

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALLEN, TROY
5625 LAKELAND HIGHLANDS RD.
LAKELAND, FL 33813 US

Name and Address of New Registered Agent:

ALLEN, TROY
816 SAGAMORE STREET
LAKELAND, FL 33803 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: TROY ALLEN

04/28/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: ALLEN, TROY
Address: 5625 LAKELAND HIGHLANDS RD.
City-St-Zip: LAKELAND, FL 33813

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: ALLEN, TROY
Address: 816 SAGAMORE STREET
City-St-Zip: LAKELAND, FL 33803

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: TROY ALLEN

MGR

04/28/2005

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