

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000059009

FILED
Sep 06, 2005
Secretary of State

Entity Name: J. M. MOORE LANDCLEARING LIMITED LIABILITY COMPANY

Current Principal Place of Business:

5510 TERRELL LOWERY ROAD
JAY, FL 32565 US

New Principal Place of Business:

5464 TERRELL LOWERY ROAD
JAY, FL 32565 US

Current Mailing Address:

5510 TERRELL LOWERY ROAD
JAY, FL 32565 US

New Mailing Address:

5464 TERRELL LOWERY ROAD
JAY, FL 32565 US

FEI Number: 74-3128344 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:

MOORE, JUSTIN M SR
5510 TERRELL LOWERY ROAD
JAY, FL 32565 US

Name and Address of New Registered Agent:

MOORE, JUSTIN M SR
5464 TERRELL LOWERY ROAD
JAY, FL 32565 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: JUSTIN M. MOORE

09/06/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: MOORE, JUSTIN M SR
Address: 5510 TERRELL LOWERY ROAD
City-St-Zip: JAY, FL 32565 US

Title: MGRM () Delete
Name: MOORE, JOY L
Address: 5510 TERRELL LOWERY ROAD
City-St-Zip: JAY, FL 32565 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: MOORE, JUSTIN M SR
Address: 5464 TERRELL LOWERY ROAD
City-St-Zip: JAY, FL 32565 US

Title: MGRM (X) Change () Addition
Name: MOORE, JOY L
Address: 5464 TERRELL LOWERY ROAD
City-St-Zip: JAY, FL 32565 US

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: JOY MOORE

MGRM

09/06/2005

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