
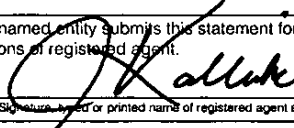
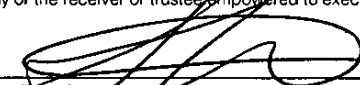


2005 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

05 MAR 24 AM 9:58

DOCUMENT # L04000063011					
1. Entity Name SAWGRASS LANDSCAPE SERVICES, LLC					
Principal Place of Business 2950 NORTH 28TH TERRACE HOLLYWOOD, FL 33020			Mailing Address 2950 NORTH 28TH TERRACE HOLLYWOOD, FL 33020		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	03112005 Chg-LLC CR2E083 (10/03) 4. FEI Number 03-0548054	
5. Certificate of Status Desired <input type="checkbox"/>				\$5.00 Additional Fee Required Applied For Not Applicable	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
THE CONTINENTAL GROUP, INC. 2950 NORTH 28TH TERRACE ATTN: ANTHONY KALLICHE HOLLYWOOD, FL 33020				Name ANTHONY KALLICHE, Esq. Street Address (P.O. Box Number is Not Acceptable) 2950 N. 28 TERRACE City HOLLYWOOD FL Zip Code 33020	
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  DATE 3/11/05 (NOTE: Registered Agent signature required when reinstating)					
Amended AR is \$50.00				Make check payable to Florida Department of State	
9. MANAGING MEMBERS/MANAGERS				10. ADDITIONS/CHANGES	
TITLE	MGR	<input type="checkbox"/> Delete		TITLE	SECRETARY, MGR <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	STRUNIN, RICHARD			NAME	
STREET ADDRESS	2950 NORTH 28 TERRACE			STREET ADDRESS	
CITY-ST-ZIP	HOLLYWOOD, FL 33020			CITY-ST-ZIP	
TITLE	MGR	<input type="checkbox"/> Delete		TITLE	TREASURER, MGR <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CHRISTENSEN, STEVEN			NAME	
STREET ADDRESS	2950 NORTH 28 TERRACE			STREET ADDRESS	
CITY-ST-ZIP	HOLLYWOOD, FL 33020			CITY-ST-ZIP	
TITLE	MGR	<input type="checkbox"/> Delete		TITLE	PRESIDENT, MGR <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PALAZZOLO, JERRY			NAME	
STREET ADDRESS	2950 NORTH 28 TERRACE			STREET ADDRESS	
CITY-ST-ZIP	HOLLYWOOD, FL 33020			CITY-ST-ZIP	
TITLE		<input type="checkbox"/> Delete		TITLE	VICE PRES., MGR <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME				NAME	LUKE FACARAZZO, JR.
STREET ADDRESS				STREET ADDRESS	2950 N. 28 TERRACE
CITY-ST-ZIP				CITY-ST-ZIP	HOLLYWOOD, FL 33020
TITLE		<input type="checkbox"/> Delete		TITLE	
NAME				NAME	
STREET ADDRESS				STREET ADDRESS	
CITY-ST-ZIP				CITY-ST-ZIP	
TITLE		<input type="checkbox"/> Delete		TITLE	
NAME				NAME	
STREET ADDRESS				STREET ADDRESS	
CITY-ST-ZIP				CITY-ST-ZIP	
11. I hereby certify that the information supplied with this filing does not qualify 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 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: 				3/11/05 (954) 925-8200 Date Daytime Phone #	