## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

### DOCUMENT # L05000008945

1. Entity Name

TREE MASTERS TREE CARE SPECIALIST LLC



FILED Apr 23, 2008 08:00 AN Secretary of State

Principal Place of Business

Mailing Address

17636 BOSLEY DRIVE SPRING HILL, FL 34610

US

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US



# DO NOT WRITE IN THIS SPACE

04152008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 27-0123583

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

POLLARE, MICHAEL 17636 BOSLEY DRIVE SPRING HILL, FL 34610

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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

#### FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75

9.	MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-SI-ZIP	MGR POLLARE, MICHAEL 17636 BOSLEY DRIVE SPRING HILL, FL 34610	
NAME STREET ADDRESS CITY-ST-ZIP		
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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

IGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

4-20-08

727-856-1115

Daytime Phone