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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L05000030653

1. Entity Name
RANDYS LAWNCARE & LANDSCAPING L.C.

Principal Place of Business	Mailing Address
~~7017 ULE LANE~~ 5320 E. 17th Ave. TAMPA, FL 33637 33619	7017 ULE LANE TAMPA, FL 33637

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

08182006 Chg-LLC CR2E083 (11/05)

4. FEI Number — ☐ Applied For ☑ Not Applicable

5. Certificate of Status Desired ☒ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

ALLEN, STANLEY J
514 HIGHVIEW CIRCLE NORTH
BRANDON, FL 33510

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

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
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $50.00
Due by September 6, 2006

Make check payable to Florida Department of State

9. MANAGING MEMBERS / MANAGERS			10. ADDITIONS / CHANGES		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR BOYETT, RANDY E 7017 ULE LANE TAMPA, FL 33637	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM BOYETT, KIMBERLY A 7017 ULE LANE TAMPA, FL 33637	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	5320 E 17TH AVE Tampa FL 33619	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM ALLEN, STANLEY J 514 HIGHVIEW CIRCLE NORTH BRANDON, FL 33510	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	5320 E 17TH AVE Tampa FL 33619	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ANNUAL REPORT 2006	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

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: Randy E Boyett MGR 8-19-06 813 310-3964
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #

N. Chilton OCT 26 2006