2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Aug 30, 2007
Secretary of State

DOCUMENT# L05000030653

Entity Name: RANDYS LAWNCARE & LANDSCAPING L.C.

Current Principal Place of Business:

5320 E. 17TH AVENUE
TAMPA, FL 33619

New Principal Place of Business:

Current Mailing Address:

5320 E. 17TH AVENUE
TAMPA, FL 33619

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **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:

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

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title:	MGR	( ) Delete
Name:	BOYETT, RANDY E	
Address:	5320 E. 17TH AVENUE	
City-St-Zip:	TAMPA, FL 33619	
Title:	MGRM	( ) Delete
Name:	BOYETT, KIMBERLY A	
Address:	5320 E. 17TH AVENUE	
City-St-Zip:	TAMPA, FL 33619	
Title:	MGRM	( ) Delete
Name:	ALLEN, STANLEY J	
Address:	514 HIGHVIEW CIRCLE NORTH	
City-St-Zip:	BRANDON, FL 33510	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: RANDY BOYETT OWNE 08/30/2007

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