2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000044662

Entity Name: EVOLVING LANDSCAPES LLC

FILED Apr 24, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

236 W. MICHIGAN AVE. APT. #3 206 N. WOODLAND BLVD. DELAND, FL 32720 US DELAND, FL 32720 US

Current Mailing Address: New Mailing Address:

236 W. MICHIGAN AVE. APT. #3

DELAND, FL 32720 US

206 N. WOODLAND BLVD.
DELAND, FL 32720 US

FEI Number: 20-2788545 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SCHROEDER, DAVID L
236 WEST MICHIGAN AVE. # 3
DELAND, FL 32720 US
SCHROEDER, DAVID L
236 WEST MICHIGAN AVE. # 1
DELAND, FL 32720 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: 04/24/2008

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 SCHROEDER, DAVID L
 Name:

 Address:
 236 WEST MICHIGAN AVENUE # 1
 Address:

 City-St-Zip:
 DELAND, FL 32720
 City-St-Zip:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 SCHROEDER, TIFFANY SMITH
 Name:

 Address:
 236 WEST MICHIGAN AVE. # 1
 Address:

 City-St-Zip:
 DELAND, FL 32720
 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: DAVID L. SCHROEDER MGRM 04/24/2008