



**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
May 23, 2007 8:00 am
Secretary of State

05-23-2007 90215 032 ****50.00

DOCUMENT # L05000076655		
1. Entity Name JON'S TREE SERVICE L.L.C.		
Principal Place of Business 883 ARMSTRONG RD WACISSA, FL 32344	Mailing Address 883 ARMSTRONG RD WACISSA, FL 32344	40118136  04122007 No Chg-LLC CR2E083 (11/05) 4. FEI Number 20-4640092 5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required Applied For Not Applicable
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent SCHEE, JONATHAN G 883 ARMSTRONG RD WACISSA, FL 32344		
DO NOT WRITE IN THIS SPACE		
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 _____ <small>Signature is typed or printed name of registered agent and fee is applicable. (NOTE: Registered Agent signature required when reinstating)</small> DATE _____		
Filing Fee is \$50.00 Due by May 1, 2007		
9. MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SCHEE, JONATHAN G PO BOX 85 WACISSA, FL 32361	DO NOT WRITE IN THIS SPACE
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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: <u>Jonathan G. Schee</u> <u>4-17-07</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #</small>		