## -2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

SIGNATURE AND TYPED OR PRINTED HAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

## DOCUMENT # L05000079412

1. Entity Name

M & M TREES & LANDSCAPING, LLC



FILED Jan 09, 2007 08:00 AN Secretary of State

Principal Place of Business

3799 NW CR 342 BELL, FL 32619 Mailing Address

P 0 B0X 224 BELL, FL 32619



01062007 No Chg-LLC

CR2E083 (11/05)

Daytime Phone #

4. FEI Number Applied For Not Applied For Not Applicable

5. Certificate of Status Desired Status Desired Fee Required Fee Required

6. Name and Address of Current Registered Agent

MOORE, MICHAEL D 3799 NW CR 342 BELL, FL 32619

## DO NOT WRITE IN THIS SPACE

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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		(NOTE, Registered Agent signature required when reinstaling)	DATE
Filing Fee is \$50.00 Due by May 1, 2007			
9.	MANAGING MEMBERS/MANAGERS		
title name street address city-st-zip	MGRM MOORE, MICHAEL D 3799 NW CR 342 BELL, FL 32619		U00000579801
TITLE NAME STREET ADDRESS CITY-ST-ZIP			01/10/07-80022-008 50.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
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.			