## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

**DOCUMENT # L05000079412** 

Entity Name

M & M TREES & LANDSCAPING, LLC



FILED
Jan 09, 2008 08:00 AN
Secretary of State

Principal Place of Business

Mailing Address

3799 NW CR 342 BELL, FL 32619 P O BOX 224 BELL, FL 32619



01052008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 20-3292087 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

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

STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
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CITY-ST-ZIP

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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			
	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE
FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75			000000776793 01/09/08-80037-012 138.75
9.	MANAGING MEMBERS/MANAGERS		
TITLE	MGRM		
NAME	MOORE, MICHAEL D		
STREET ADDRESS	3799 NW CR 342	ľ	
C(TY-ST-ZIP	BELL, FL 32619		•
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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:

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

Date

Daytime Phone #