

# **2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000102173

**FILED**  
**Apr 29, 2006**  
**Secretary of State**

**Entity Name:** A CUT ABOVE TREE SERVICE, LLC

**Current Principal Place of Business:**

1577 PINEY GROVE ROAD  
CHIPLEY, FL 32428

**New Principal Place of Business:**

**Current Mailing Address:**

1577 PINEY GROVE ROAD  
CHIPLEY, FL 32428

**New Mailing Address:**

**FEI Number:** 20-3634410

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MORRIS, JASON T  
1677 PINEY GROVE ROAD  
CHIPLEY, FL 32428 US

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

MORRIS, JASON T  
1577 PINEY GROVE ROAD  
CHIPLEY, FL 32428 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:

04/29/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: MORRIS, JASON T  
Address: 1577 PINEY GROVE ROAD  
City-St-Zip: CHIPLEY, FL 32428

**ADDITIONS/CHANGES:**

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

I hereby certify that the information supplied with this filing does not qualify for the 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: JASON MORRIS

MGR

04/29/2006

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