

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000003663

FILED  
Jul 08, 2008  
Secretary of State

**Entity Name:** LARRY LEMSTROM FENCING, LLC

**Current Principal Place of Business:**

8361 SW 200TH CT.  
DUNNELLON, FL 34431

**New Principal Place of Business:**

3810 N.W. 105 STR.  
OCALA, FL 34482

**Current Mailing Address:**

P.O. BOX 409  
LOWELL, FL 32663

**New Mailing Address:**

FEI Number: 16-1765355      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

LEMSTROM, LARRY  
8361 SW 200TH CT.  
DUNNELLON, FL 34431      US

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

LEMSTROM, LARRY  
3810 N.W. 105 STR.  
OCALA, FL 34482      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: \_\_\_\_\_

07/08/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM      ( ) Delete  
Name: LEMSTROM, LARRY  
Address: P.O. BOX 409  
City-St-Zip: LOWELL, FL 32663

**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 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: LARRY LEMSTROM

MGR.

07/08/2008

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