

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT (AR) - DUE BY MAY 1, 2008**

FILED
May 14, 2008 8:00 am
Secretary of State

04-11-2008 90177 033 ****50.00
05-14-2008 90078 023 ****88.75

DOCUMENT # L06000043341	
1. Entity Name LESLIE'S LAWN & LANDSCAPE LLC	

Principal Place of Business 1217 HELENA ROAD WINTER HAVEN FL 33884	Mailing Address 1217 HELENA ROAD WINTER HAVEN FL 33884
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2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

4. FEI Number 20-5153657	Applied For No: Applicable
5. Certificate of Status Desired ☐	\$5.00 Additional Fee Required

1st MOORE CR2E083 (10/07)



6. Name and Address of Current Registered Agent BLUM, LESLIE J 1217 HELENA ROAD WINTER HAVEN FL 33884	
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7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	FL Zip Code

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 fee (if applicable) (NOTE: Registered agent signature required when re-registering) DATE _____

FILE NOW!!! FEE IS \$138.75 After May 1, 2008, Fee Will Be \$538.75 Make Check Payable to Florida Department of State	
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9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM, BLUM, LESLIE J 1217 HELENA ROAD WINTER HAVEN FL 33884 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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.

Leslie J Blum
SIGNATURE: Leslie J Blum **3-17-08**

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

ATTACHMENT

3-7-08

To
Annular Reports Section, 60040978
LD6000043341

I have filed my annular report on time
but obviously did not fill in the correct amount
for the fee. Last year I filed online and
it was \$50.00. I apologize for the inconvenience
and hope you'll accept my check for the
remainder of the fee.

Thank you

Leslie J. Blum
Leslie's Gun & Cartridge LLC.