

# **2007 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000045362

**FILED**  
**Apr 18, 2007**  
**Secretary of State**

**Entity Name:** GATORSCAPING SERVICES, LLC

**Current Principal Place of Business:**

4414 NW 41ST LANE  
GAINESVILLE, FL 32606

**New Principal Place of Business:**

17271 NW 240TH TERRACE  
HIGH SPRINGS, FL 32643

**Current Mailing Address:**

P.O. BOX 27  
NEWBERRY, FL 32669

**New Mailing Address:**

**FEI Number:** 59-0302240

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SWEENEY, CHRISTOPHER K  
4414 NW 41ST LANE  
GAINESVILLE, FL 32606 US

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

SWEENEY, CHRISTOPHER K  
17271 NW 240 TH TERRACE  
HIGH SPRINGS, FL 32643 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: \_\_\_\_\_

04/18/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: SWEENEY, CHRISTOPHER K  
Address: P.O. BOX 27  
City-St-Zip: NEWBERRY, FL 32669

**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: CHRISTOPHER K. SWEENEY

MGR

04/18/2007

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