

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000071947

FILED
Feb 13, 2007
Secretary of State

Entity Name: A ABSOLUTE TREE SERVICE LLC

Current Principal Place of Business:

5131 BLUE SPRINGS COVE
BAKER, FL 32531

New Principal Place of Business:

Current Mailing Address:

5131 BLUE SPRINGS COVE
BAKER, FL 32531

New Mailing Address:

FEI Number: 20-5227361

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SWANNER, RONNIE
5131 BLUE SPRINGS COVE
BAKER, FL 32531 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: SWANNER, RONNIE
Address: 5131 BLUE SPRINGS COVE
City-St-Zip: BAKER, FL 32531

Title: MGRM () Delete
Name: SWANNER, DONALD
Address: 5131 BLUE SPRINGS COVE
City-St-Zip: BAKER, FL 32531

Title: MGRM () Delete
Name: WHITEHEAD, CHARLES
Address: 2844 PENNY LANE
City-St-Zip: CRESTVIEW, FL 32536

ADDITIONS/CHANGES:

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

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

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: RONNIE SWANNER

MGRM

02/13/2007

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