## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L06000071947

Entity Name: A ABSOLUTE TREE SERVICE LLC

FILED Feb 29, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

5131 BLUE SPRINGS COVE 5688 REINKE DR

BAKER, FL 32531 CRESTVIEW, FL 32539

Current Mailing Address: New Mailing Address:

5131 BLUE SPRINGS COVE 5688 REINKE DR

BAKER, FL 32531 CRESTVIEW, FL 32539

FEI Number: 20-5227361 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

SWANNER, RONNIE PUCHALES, FREDDIE 5131 BLUE SPRINGS COVE 5688 REINKE DR

BAKER, FL 32531 US CRESTVIEW, FL 32539 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: FREDDIE PUCHALES 02/29/2008

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM ( ) Delete Title: MGRM (X) Change ( ) Addition

 Name:
 SWANNER, RONNIE
 Name:
 SWANNER, DONALD

 Address:
 5131 BLUE SPRINGS COVE
 Address:
 5688 REINKE DR

 City-St-Zip:
 BAKER, FL 32531
 City-St-Zip:
 CRESTVIEW, FL 32539

Title: MGRM ( ) Delete Title: MGRM (X) Change ( ) Addition Name: SWANNER, DONALD Name: PUCHALES, FREDDIE

 Address:
 5131 BLUE SPRINGS COVE
 Address:
 5688 REINKE DR

 City-St-Zip:
 BAKER, FL 32531
 City-St-Zip:
 CRESTVIEW, FL 32539

Title: MGRM (X) Delete Title: ( ) Change ( ) Addition

 Name:
 WHITEHEAD, CHARLES
 Name:

 Address:
 2844 PENNY LANE
 Address:

 City-St-Zip:
 CRESTVIEW, FL 32536
 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: FREDDIE PUCHALES MGRM 02/29/2008