

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000078597

**FILED**  
**Apr 27, 2012**  
**Secretary of State**

**Entity Name:** VAL & MIKE'S LAWN AND GARDEN SUPPLIES, LLC

**Current Principal Place of Business:**

4002 W OBISPO STREET  
TAMPA, FL 33629

**New Principal Place of Business:**

**Current Mailing Address:**

4002 W OBISPO STREET  
TAMPA, FL 33629

**New Mailing Address:**

**FEI Number:** 20-5349767

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

HINGSON KNIGHT, VALERIE  
4002 W OBISPO STREET  
LUTZ, FL FL US

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

HINGSON KNIGHT, VALERIE  
4002 W OBISPO STREET  
TAMPA, FL FL 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: \_\_\_\_\_

Electronic Signature of Registered Agent

04/27/2012

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: HINGSON KNIGHT, VALERIE  
Address: 4002 W OBISPO STREET  
City-St-Zip: TAMPA, FL 33629

Title: MGRM  
Name: HINGSON, HEATHER  
Address: 16867 LECLARE SHORE DR.  
City-St-Zip: TAMPA, FL 33624

I hereby 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: VALERIE H KNIGHT

MGRM

04/27/2012

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