

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000093271

FILED  
Apr 25, 2008  
Secretary of State

**Entity Name:** TOP NOTCH TREE SERVICE OF NW FLORIDA, LLC

**Current Principal Place of Business:**

397 E. KINGSFIELD ROAD  
CANTONMENT, FL 32533 US

**New Principal Place of Business:**

**Current Mailing Address:**

397 E. KINGSFIELD ROAD  
CANTONMENT, FL 32533 US

**New Mailing Address:**

**FEI Number:** 20-5599832

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

STURGEN, WILLIAM M JR  
2253 COUNTRY PLACE CIRCLE  
PENSACOLA, FL 325349501 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:** MITCHELL, DAVID M  
**Address:** 397 EAST KINGSFIELD RD  
**City-St-Zip:** CANTONMENT, FL 32533 US

**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 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:** DAVID M. MITCHELL

MGRM

04/25/2008

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