

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000094238

FILED
Aug 14, 2007
Secretary of State

Entity Name: LAWN CARE BY BILL SNYDER L.L.C.

Current Principal Place of Business:

1290 N. RIDGE BLVD.
APT. 3025
CLERMONT, FL 34711

New Principal Place of Business:

412 REGATTA DR
GROVELAND, FL 34736

Current Mailing Address:

1290 N. RIDGE BLVD.
APT. 3025
CLERMONT, FL 34711

New Mailing Address:

412 REGATTA DR
GROVELAND, FL 34736

FEI Number: 20-8418813 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

SNYDER, BILL
1290 N. RIDGE BLVD.
APT 1825
CLERMONT, FL 34711 US

Name and Address of New Registered Agent:

SNYDER, BILL
412 REGATTA DR
GROVELAND, FL 34736 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:

08/14/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: SNYDER, BILL
Address: 1290 N. RIDGE BLVD.
City-St-Zip: CLERMONT, FL 34711

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: SNYDER, BILL
Address: 412 REGATTA DR
City-St-Zip: GROVELAND, FL 34736

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: BILL SNYDER

MGR

08/14/2007

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