

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000096126

**FILED**  
**Apr 30, 2012**  
**Secretary of State**

**Entity Name:** GULF COAST LANDSCAPING & LAWN SERVICE, LLC

**Current Principal Place of Business:**

1458 THE CROSSING  
NICEVILLE, FL 32578

**New Principal Place of Business:**

**Current Mailing Address:**

1458 THE CROSSING  
NICEVILLE, FL 32578

**New Mailing Address:**

**FEI Number:** 20-5700095

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PORTER, BEN T  
1458 THE CROSSING  
NICEVILLE, FL 32578 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  
Name: PORTER, BEN  
Address: 1458 THE CROSSINGS  
City-St-Zip: NICEVILLE, FL 32578 US

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: BEN T. PORTER

MGRM

04/30/2012

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