FILED
Apr 03, 2008 8:00 am
Secretary of State

04-03-2008 90069 020 ***138.75

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L06000110167

1. Entity Name
ERGOOD LANDSCAPING, LLC

600019231

Principal Place of Business	Mailing Address
8228 25 TH AVE. N. ST. PETERSBURG, FL 33710	8228 25 TH AVE. N. ST. PETERSBURG, FL 33710

02132008 Chg-LLC CR2E083 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
8864 Founders Cir	8864 Founders Cir.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Palmetto, FL	City & State: Palmetto, FL.
Zip: 34221 Country:	Zip: 34221 Country:

4. FEI Number: 20-5880982 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

ERGOOD, CHRISTOPHER J
8228 25 TH AVE N.
ST. PETERSBURG, FL 33710

7. Name and Address of New Registered Agent

Name:
Street Address (P.O. Box Number is Not Acceptable): 8864 Founders Cir.
City: Palmetto FL Zip Code: 34221

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE ______________________________
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $138.75
After May 1, 2008 Fee will be $538.75

Make check payable to Florida Department of State

9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM ERGOOD, CHRISTOPHER J 8228 25 TH AVE N. ST. PETERSBURG, FL 33710	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	 8864 Founders Cir. Palmetto, FL 34221	☒ Change ☐ Addition
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: Christopher J. Ergood 2/15/08 (727) 744-1035
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #