2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L06000114252

1. Entity Name
THE MOW COW, LLC



FILED Apr 10, 2008 08:00 A Secretary of State

Principal Place of Business

254 MILITARY BLVD. ORMOND BEACH, FL 32174 Mailing Address PO BOX 730834

ORMOND BEACH, FL 32173



DO NOT WRITE IN THIS SPACE

01242008 No Chg-LLC

LLC CR2E083 (12/07)

4. FEI Number 74-3201782

Applied For
Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

LAUX, DAVID 254 MILITARY BLVD. ORMOND BEACH, FL 32174

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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

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MANAGING MEMBERS/MANAGERS 9. **MGRM** TITLE LAUX, DAVID STREET ADDRESS 254 MILITARY BLVD. CITY-ST-ZIP ORMOND BEACH, FL 32174 STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7IP

DO NOT WRITE IN THIS SPACE

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

4/7/08

380-252-421

Daytime Phone #