

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000000111

FILED
Feb 05, 2007
Secretary of State

Entity Name: TRIPLE J GRASSING, LLC

Current Principal Place of Business:

2360 PRINCE STREET
FORT MYERS, FL 33916

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 7258
FORT MYERS, FL 339117258

New Mailing Address:

FEI Number: 65-1059043

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GREEN, BRUCE D
1380 ROYAL PALM SQUARE BOULEVARD
FORT MYERS, FL 33919 US

Name and Address of New Registered Agent:

KOLLMANN, PAMELA
2360 PRINCE STREET
FORT MYERS, FL 33916 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: PAMELA KOLLMANN

02/05/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR () Change (X) Addition
Name: KOLLMANN, PAMELA
Address: P.O. BOX 7258
City-St-Zip: FORT MYERS, FL 339117258

Title: MGR () Change (X) Addition
Name: PEASE, ROBERT SR
Address: P.O. BOX 7258
City-St-Zip: FORT MYERS, FL 339117258

Title: MGR () Change (X) Addition
Name: PEASE, ROBERT JR
Address: P.O. BOX 7258
City-St-Zip: FORT MYERS, FL 339117258

Title: MGR () Change (X) Addition
Name: KOLLMANN, KEVIN
Address: P.O. BOX 7258
City-St-Zip: FORT MYERS, FL 339117258

I hereby certify that the information supplied with this filing does not qualify for the 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: PAMELA KOLLMANN

MGR

02/05/2007

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