2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 15, 2008 8:00 am
Secretary of State
04-15-2008 90105 016 ***143.75

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1. Entity Name
BRUSH UP LAND CLEARING, LLC

JUUU3111

04112008 Chg-LLC CR2E083 (12/06)

Principal Place of Business	Mailing Address
20464 29TH DRIVE WELLBORN, FL 32094 moved	20464 29TH DRIVE WELLBORN, FL 32094 moved

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
109 Elvira St.	P.O. Box 1075
Suite, Apt. #, etc. B	Suite, Apt. #, etc.
City & State Georgetown, FL	City & State Crescent City, FL
Zip 32139 Country USA	Zip 32112 Country USA

4. FEI Number
20-8250734 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
RICHEY, STEVEN J ESQ 601 SOUTH NINTH STREET LEESBURG, FL 34748	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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

FILE NOW!!! FEE IS $138.75
After May 1, 2008 Fee will be $638.75

Make check payable to Florida Department of State

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM PARKER, OLIVER F ~~20464 29TH DRIVE~~ P.O. Box 1075 ~~WELLBORN, FL 32094~~ Crescent City, FL 32112 (109 Elvira St. Georgetown, FL 32139) ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR PARKER, JUDY ~~20464 29TH DRIVE~~ P.O. Box 1075 ~~WELLBORN, FL 32094~~ Crescent City, FL 32112 (109 Elvira St. Georgetown, FL 32139) ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR RICHEY, THOMAS W 491 RICHEY RD LEESBURG, FL 34748 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR RICHEY, APRIL P 491 RICHEY ROAD LEESBURG, FL 34748 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

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: Judy Parker JUDY PARKER 4-11-08 386-467-9959
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #