

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000025858

FILED
May 02, 2008
Secretary of State

Entity Name: SCHWERER LANDSCAPING, LLC

Current Principal Place of Business:

2705 PLACID AVENUE
FORT PIERCE, FL 34982

New Principal Place of Business:

10647 PINE NEEDLE DRIVE
FORT PIERCE, FL 34945

Current Mailing Address:

2705 PLACID AVENUE
FORT PIERCE, FL 34982

New Mailing Address:

10647 PINE NEEDLE DRIVE
FORT PIERCE, FL 34945

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

SCHWERER, ROBERT V ESQ.
515-519 SOUTH INDIAN RIVER DRIVE
FORT PIERCE, FL 34982 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 () Delete
Name: SCHWERER, MICHAEL P
Address: 2705 PLACID AVENUE
City-St-Zip: FORT PIERCE, FL 34982

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: SCHWERER, MICHAEL P
Address: 10647 PINE NEEDLE DRIVE
City-St-Zip: FORT PIERCE, FL 34945

I hereby certify that the information supplied with this filing does not qualify 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: MICHAEL P. SCHWERER

MR.

05/02/2008

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