

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000068012

Entity Name: L & S LAWNS, LLC

**FILED**  
**Jan 04, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

3688 TOMLINSON ST  
BONITA SPRINGS, FL 34134

**New Principal Place of Business:**

3727 ENTERPRISE AVE  
NAPLES, FL 34104

**Current Mailing Address:**

3688 TOMLINSON  
BONITA SPRINGS, FL 34134

**New Mailing Address:**

3727 ENTERPRISE AVE  
NAPLES, FL 34104

FEI Number: 26-0438614

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SPIKER, MICHAEL F  
MICHAEL SPIKER  
3688 TOMLINSON ST  
BONITA SPRINGS, FL 34134 US

**Name and Address of New Registered Agent:**

SPIKER, MICHAEL F  
MICHAEL SPIKER  
3727 ENTERPRISE AVE  
NAPLES, FL 34104 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: MICHAEL JOEL SPIKER

01/04/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: SPIKER, MICHAEL JOEL  
Address: 3688 TOMLINSON  
City-St-Zip: BONITA SPRINGS, FL 34134

Title: MGRM  
Name: LUBAS, ROBERT ANTHONY  
Address: 198 PINEHURST CIRCLE  
City-St-Zip: NAPLES, FL 34113

I hereby 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 JOEL SPIKER

MGRM

01/04/2012

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