

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000069603

**FILED**  
**Apr 26, 2011**  
**Secretary of State**

**Entity Name:** PARRY'S LANDSCAPING, LLC

**Current Principal Place of Business:**

1819 CHEROKEE TRAIL  
LAKELAND, FL 33803 US

**New Principal Place of Business:**

131 W. MAIN ST,  
LAKELAND, FL US

**Current Mailing Address:**

P.O. BOX 2235  
LAKELAND, FL 33806 US

**New Mailing Address:**

**FEI Number:** 26-0744934      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

PUTNAM, ABEL A  
500 SOUTH FLORIDA AVENUE  
SUITE 300  
LAKELAND, FL 33801 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  
**Name:** PARRY, WILLIAM T  
**Address:** 1819 CHEROKEE TRAIL  
**City-St-Zip:** LAKELAND, FL 33803 US

**Title:** SEC  
**Name:** PARRY, MARGARET C  
**Address:** 1819 CHEROKEE TRAIL  
**City-St-Zip:** LAKELAND, FL 33803 US

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: WILLIAM T. PARRY

PRES

04/26/2011

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