

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L07000072930

1. Entity Name
JARVIS'S GRADING & TRACTOR SERVICE, LLC



Principal Place of Business
**610 REDGRAVE ROAD
DAVENPORT, FL 33837 US**

Mailing Address
**POST OFFICE BOX 725
LOUGHMAN, FL 33858 US**

2008 SEP 17 PM 12:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



2. Principal Place of Business - No P.O. Box #
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

City & State
Zip Country

09102008 Chg-LLC CR2E083 (12/06)

4. FEI Number
26-0539207

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent
**DENNIS, JARVIS C
610 REDGRAVE ROAD
DAVENPORT, FL 33837**

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

**FILE NOW!!! FEE IS \$138.75
Due by September 12, 2008**

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Make check payable to
Florida Department of State

| 9. MANAGING MEMBERS/MANAGERS | | 10. ADDITIONS/CHANGES | |
|--|--|--|---|
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | MGRM DENNIS, JARVIS C 610 REDGRAVE ROAD DAVENPORT, FL 33837 <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY - ST - ZIP | 600136149086 09/19/08 01042 004 **138.75 <input type="checkbox"/> Change <input type="checkbox"/> Addition |
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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: Jarvis C. Dennis Managing Member 9/10/08 863-424-3502
Signature, typed or printed name of signing managing member, manager, or authorized representative Date Daytime Phone #