

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000116822

FILED
May 09, 2008
Secretary of State

Entity Name: COOL BREEZE LAWN CARE & TREE SERVICE, L.L.C.

Current Principal Place of Business:

1223 RONALD STREET
TITUSVILLE, FL 32780

New Principal Place of Business:

Current Mailing Address:

1223 RONALD STREET
TITUSVILLE, FL 32780

New Mailing Address:

FEI Number: 26-1440126 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **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:

MEDINA, JOHN
1223 RONALD STREET
TITUSVILLE, FL 32780 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: MEDINA, JOHN
Address: 1223 RONALD STREET
City-St-Zip: TITUSVILLE, FL 32780

Title: MGRM () Delete
Name: PINNER, DAVID L JR.
Address: 1223 RONALD STREET
City-St-Zip: TITUSVILLE, FL 32780

Title: MGRM () Delete
Name: MEDINA, JUSTIN A
Address: 1223 RONALD STREET
City-St-Zip: TITUSVILLE, FL 32780

Title: MGRM () Delete
Name: PINNER, KEITH K
Address: 1223 RONALD STREET
City-St-Zip: TITUSVILLE, FL 32780

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JOHN MEDINA

MGRM

05/09/2008

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