

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000117204

Entity Name: IRISH GREEN LAWNS, LLC

FILED  
May 01, 2008  
Secretary of State

## Current Principal Place of Business:

7 PLAZA DRIVE  
ORMOND BEACH, FL 32176

## New Principal Place of Business:

4000 CARDINAL BLVD  
WILBUR BY THE SEA, FL 32127

## Current Mailing Address:

7 PLAZA DRIVE  
ORMOND BEACH, FL 32176

## New Mailing Address:

4000 CARDINAL BLVD  
WILBUR BY THE SEA, FL 32127

FEI Number: 26-1444891      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:

GAVIN, JAMES P  
7 PLAZA DRIVE  
ORMOND BEACH, FL 32176      US

## Name and Address of New Registered Agent:

GAVIN, JAMES P  
4000 CARDINAL BLVD  
WILBUR BY THE SEA, FL 32127      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:

05/01/2008

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR      ( ) Delete  
Name: GAVIN, JAMES P  
Address: 7 PLAZA DRIVE  
City-St-Zip: ORMOND BEACH, FL 32176

## ADDITIONS/CHANGES:

Title: MGR      (X) Change      ( ) Addition  
Name: GAVIN, JAMES P  
Address: 4000 CARDINAL BLVD  
City-St-Zip: WILBUR BY THE SEA, FL 32127

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: JAMES P GAVIN

PRES

05/01/2008

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