

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000121765

**FILED**  
**Mar 24, 2008**  
**Secretary of State**

**Entity Name:** COLLEEN'S LAWN SERVICE LLC

**Current Principal Place of Business:**

1806 SE 6TH LN  
CAPE CORAL, FL 33990

**New Principal Place of Business:**

**Current Mailing Address:**

1806 SE 6TH LN  
CAPE CORAL, FL 33990

**New Mailing Address:**

**FEI Number:** 26-1494718

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CANCELLIERE, COLLEEN  
1806 SE 6TH LN  
CAPE CORAL, FL 33990 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: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MGR ( ) Change (X) Addition  
Name: COLLEEN, CANCELLIERE  
Address: 1806 SE 6TH LANE  
City-St-Zip: CAPE CORAL, FL 33990

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: COLLEEN CANCELLIERE

MGR

03/24/2008

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