

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000026799

FILED
Apr 11, 2012
Secretary of State

Entity Name: A.M.N. THE MOWER MEDIC "LLC"

Current Principal Place of Business:

3633 BUCKHEAD RD
JACKSONVILLE, FL 32216

New Principal Place of Business:

Current Mailing Address:

3633 BUCKHEAD RD
JACKSONVILLE, FL 32216

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NAPOLI, ANTHONY M
3633 BUCKHEAD RD
JACKSONVILLE, FL 32216 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: MGR
Name: NAPOLI, ANTHONY MARK
Address: 3633 BUCKHEAD RD
City-St-Zip: JACKSONVILLE, FL 32216

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: ANTHONY M NAPOLI

MGR

04/11/2012

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