2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000041917

Entity Name: WILFORD/ODOM LAWN & TREE SERVICE LLC

FILED Feb 23, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

83 CIRCLE SIX TRAIL MONTICELLO, FL 32344

Current Mailing Address: New Mailing Address:

83 CIRCLE SIX TRAIL MONTICELLO, FL 32344

FEI Number: 26-2492090 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

WILFORD, HEATH

83 CIRCLE SIX TRAIL

MONTICELLO, FL 32344 US

ODOM, BRIAM M

83 CIRCLE SIX TRAIL

MONTICELLO, FL 32344 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: BRIAN ODOM 02/23/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM () Delete Title: MGR (X) Change () Addition Name: WILFORD, HEATH Name: ODOM, BRIAN M

 Address:
 2111 BOSTON HWY
 Address:
 83 CIRCLE SIX TRAIL

 City-St-Zip:
 MONTICELLO, FL 32344
 City-St-Zip:
 MONTICELLO, FL 32344

Title: MGRM () Delete Title: MGRM (X) Change () Addition
Name: ODOM, BRIAN Name: ODOM, JACQULINE L
Address: 93 CIRCLE SIX TRAIL

Address: 83 CIRCLE SIX TRAIL
City-St-Zip: MONTICELLO, FL 32344

Name: ODOM, ACCOLINE L
Address: 83 CIRCLE SIX TRAIL
City-St-Zip: MONTICELLO, FL 32344

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: BRIAN ODOM MGR 02/23/2009