

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000043794

Entity Name: G&R LAWN CARE LLC

**FILED**  
**Jan 29, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

5491 LONGLEAF DR.  
N FT MYERS, FL 33917 US

**New Principal Place of Business:**

**Current Mailing Address:**

5491 LONGLEAF DR.  
N FT MYERS, FL 33917 US

**New Mailing Address:**

FEI Number: 26-2530780

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BYRD, RANDY  
5491 LONGLEAF DR.  
N FT MYERS, FL 33917 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  
Name: BYRD, RANDY  
Address: 5491 LONGLEAF DR.  
City-St-Zip: N FT MYERS, FL 33917 US

Title: MGRM  
Name: BYRD, GREG  
Address: 5491 LONGLEAF DR.  
City-St-Zip: N FT MYERS, FL 33917 US

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: RANDY BYRD

MGRM

01/29/2010

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