

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000080554

FILED
Apr 23, 2011
Secretary of State

Entity Name: TROPICAL LANDSCAPE PROFESSIONALS LLC

Current Principal Place of Business:

310 NW SHIRLEY CT
PORT SAINT LUCIE, FL 34986

New Principal Place of Business:

Current Mailing Address:

310 NW SHIRLEY CT
PORT SAINT LUCIE, FL 34986

New Mailing Address:

FEI Number: 26-3218830

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOWALD, JASON B
310 NW SHIRLEY CT
PORT SAINT LUCIE, FL 34986 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: HOWALD, JASON B
Address: 310 NW SHIRLEY CT
City-St-Zip: PORT SAINT LUCIE, FL 34986

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: JASON B. HOWALD

MGR

04/23/2011

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