

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000084145

FILED  
Apr 28, 2009  
Secretary of State

Entity Name: OVER THE TOP LAWN CARE & HAULING, LLC

## Current Principal Place of Business:

436 WENTRHOP CIRCLE  
ROCKLEDGE, FL 32955

## New Principal Place of Business:

436 WENTHROP CIRCLE  
ROCKLEDGE, FL 32955

## Current Mailing Address:

436 WENTRHOP CIRCLE  
ROCKLEDGE, FL 32955

## New Mailing Address:

436 WENTHROP CIRCLE  
ROCKLEDGE, FL 32955

FEI Number: 26-2706054

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

RICHARDSON, JULIA  
436 WENTRHOP CIRCLE  
ROCKLEDGE, FL 32955 US

## Name and Address of New Registered Agent:

RICHARDSON, JULIA  
436 WENTHROP CIRCLE  
ROCKLEDGE, FL 32955 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: JULIA RICHARDSON

04/28/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: BASS, THOMAS P  
Address: 436 WENTRHOP CIRCLE  
City-St-Zip: ROCKLEDGE, FL 32955

Title: MGRM ( ) Delete  
Name: RICHARDSON, JULIA  
Address: 436 WENTRHOP CIRCLE  
City-St-Zip: ROCKLEDGE, FL 32955

Title: MGRM ( ) Delete  
Name: GARRETT, NATHAN J  
Address: 1070 WILDFLOWER DRIVE  
City-St-Zip: MELBOURNE, FL 32940

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: BASS, THOMAS P  
Address: 436 WENTHROP CIRCLE  
City-St-Zip: ROCKLEDGE, FL 32955

Title: MGRM (X) Change ( ) Addition  
Name: RICHARDSON, JULIA  
Address: 436 WENTHROP CIRCLE  
City-St-Zip: ROCKLEDGE, FL 32955

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: JULIA RICHARDSON

MGRM

04/28/2009

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