

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000114384

FILED
Jun 25, 2009
Secretary of State

Entity Name: WEAVER LANDSCAPING, LLC

Current Principal Place of Business:

621 33RD STREET COURT WEST
BRADENTON, FL 34205

New Principal Place of Business:

Current Mailing Address:

621 33RD STREET COURT WEST
BRADENTON, FL 34205

New Mailing Address:

FEI Number: 26-3983281 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

WEAVER LANDSCAPING INCORPORATED
621 33RD STREET COURT WEST
BRADENTON, FL 34205 US

Name and Address of New Registered Agent:

WEAVER LANDSCAPING INCORPORATED
621 33RD STREET COURT WEST
BRADENTON, FL 34205 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: TODD WALTERS

06/25/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: WEAVER, PAUL
Address: 621 33RD STREET COURT WEST
City-St-Zip: BRADENTON, FL 34205

Title: MGRM () Delete
Name: WALTERS, TODD
Address: 621 33RD STREET COURT WEST
City-St-Zip: BRADENTON, FL 34205

ADDITIONS/CHANGES:

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

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: TODD WALTERS

MGRM

06/25/2009

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