

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000003269

**FILED**  
**Jan 18, 2010**  
**Secretary of State**

**Entity Name:** LAWNMOWER HEADQUARTERS II LLC

**Current Principal Place of Business:**

1539 DEL PRADO BLVD S  
CAPE CORAL, FL 33990

**New Principal Place of Business:**

**Current Mailing Address:**

1539 DEL PRADO BLVD S  
CAPE CORAL, FL 33990

**New Mailing Address:**

**FEI Number:** 26-4075369

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KENNEDY, LISA  
515 EVERGREEN RD  
NORTH FT MYERS, FL 33903 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:** KENNEDY, JAMES L  
**Address:** 515 EVERGREEN RD  
**City-St-Zip:** NORTH FT MYERS, FL 33903

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: JAMES KENNEDY

OWNE

01/18/2010

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