

**2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000043365

**FILED**  
**Apr 30, 2012**  
**Secretary of State**

**Entity Name:** SOUTHERN STYLE LAWN SERVICE LLC

**Current Principal Place of Business:**

14306 NW 154TH TERRACE  
ALACHUA, FL 32615

**New Principal Place of Business:**

**Current Mailing Address:**

16015 NW 243RD WAY  
HIGH SPRINGS, FL 32643

**New Mailing Address:**

**FEI Number:** 26-4750858      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

LEWIS, ELIZABETH A  
16015 NW 243RD WAY  
HIGH SPRINGS, FL 32643      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:** LEWIS, MARTHA D  
**Address:** P O BOX 1421  
**City-St-Zip:** ALACHUA, FL 32616

**Title:** MGRM  
**Name:** LEWIS, LANCE A  
**Address:** 16015 NW 243RD WAY  
**City-St-Zip:** HIGH SPRINGS, FL 32643

**Title:** MGRM  
**Name:** LEWIS, EIZABETH A  
**Address:** 16015 NW 243RD WAY  
**City-St-Zip:** HIGH SPRINGS, FL 32643

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: LEWIS, MARTHA, D      MGRM      04/30/2012

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