

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000013756

Entity Name: L. & V.'S LAWN CARE L.L.C.

**FILED**  
**Mar 17, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

2502 B-HOLTON ST. APT. G-141  
TALLAHASSEE, FL 32310

**New Principal Place of Business:**

**Current Mailing Address:**

2502 B-HOLTON ST. APT. G-141  
TALLAHASSEE, FL 32310

**New Mailing Address:**

FEI Number: 80-0542424

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LINDSEY, VALERIE D  
2502 B-HOLTON ST. APT. G-141  
TALLAHASSEE, FL 32310 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: LINDSEY, VALERIE D  
Address: 2502 B-HOLTON ST. APT. G-141  
City-St-Zip: TALLAHASSEE, FL 32310

Title: MGRM  
Name: LINDSEY, LEONARD JR.  
Address: 2502 B-HOLTON ST. APT. G-141  
City-St-Zip: TALLAHASSEE, FL 32310

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: VALERIE D. LINDSEY

MGRM

03/17/2011

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