

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000006859

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

**Entity Name:** ICONIC LAWN CARE & REPAIR, LLC

**Current Principal Place of Business:**

434 ROSEWOOD ST.  
QUINCY, FL 32351

**New Principal Place of Business:**

1408G CAPITAL CIRCLE NORTH EAST  
TALLAHASSEE, FL 32308

**Current Mailing Address:**

434 ROSEWOOD ST.  
QUINCY, FL 32351

**New Mailing Address:**

PO BOX 14022  
TALLAHASSEE, FL 32317

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

CORPORATION SERVICE COMPANY  
1201 HAYS ST  
TALLAHASSEE, FL 32301 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: HYDER, JAMES L  
Address: 434 ROSEWOOD ST.  
City-St-Zip: QUINCY, FL 32351

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 L. HYDER

MGRM

04/30/2012

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