

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000019290

Entity Name: DAVID SWINGLE LAWN CARE, L.L.C.

Current Principal Place of Business:

3947 SILLHOUETTE
HOLLIDAY, FL 34691

Current Mailing Address:

PO BOX 1883
PALM HARBOR, FL 34683

FEI Number: 65-1191113

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SWINGLE, DAVID
3947 SILLHOUETTE
HOLLIDAY, FL 34691 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: _____

Electronic Signature of Registered Agent

_____ Date

Authorized Person(s) Detail :

Title MGR
Name SWINGLE, DAVID
Address 3947 SILLHOUETTE
City-State-Zip: HOLLIDAY FL 34691

I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DAVID SWINGLE

OWNER

04/30/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date