

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000073006

**Entity Name:** XTREME LAWN SERVICE, LLC

**Current Principal Place of Business:**

7822 THOMAS DR.  
PANAMA CITY BEACH, FL 32408

**Current Mailing Address:**

POST OFFICE BOX 19111  
PANAMA CITY BEACH, FL 32417

**FEI Number:** 38-3738129

**Certificate of Status Desired:** Yes

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

GILMER, AMANDA M  
7822 THOMAS DR  
PANAMA CITY BEACH, FL 32408 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:** AMANDA GILMER

03/10/2014

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name GILMER, CHRISTOPHER L  
Address POST OFFICE BOX 19111  
City-State-Zip: PANAMA CITY BEACH FL 32417

Title MGR  
Name AMANDA, GILMER M  
Address PO BOX 19111  
City-State-Zip: PANAMA CITY BEACH FL 32417

*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:** AMANDA GILMER

**OWNER**

03/10/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date