

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000017221

**Entity Name:** BOBS TREE SERVICE LLC

**Current Principal Place of Business:**

550 NE. 49 ST. 34479  
OCALA, FL 34479

**Current Mailing Address:**

PO BOX 1708  
ANTHONY, FL 32617

**FEI Number:** 77-0669438

**Certificate of Status Desired:** No

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

JETT, ROBERT L  
550 NE 49 ST.  
OCALA, FL 34479 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 MGRM  
Name JETT, ROBERT L  
Address 550 NE 49 ST.  
City-State-Zip: OCALA FL 34479

*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:** ROBERT L. JETT

**OWNER**

**01/14/2018**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date