

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000069053

**Entity Name:** YOUR NEIGHBORHOOD LAWN SERVICE, LLC.

**Current Principal Place of Business:**

1667 S. HIGHWAY 17-92  
LONGWOOD, FL 32750

**Current Mailing Address:**

P O BOX 181322  
CASSELBERRY, FL 32718-1322 US

**FEI Number:** 45-2536865

**Certificate of Status Desired:** No

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

HARMON, CRAIG  
876 TUMBLEWEED LANE  
CASSELBERRY, FL 32707 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 HARMON, CRAIG  
Address 876 TUMBLEWEED LN  
City-State-Zip: CASSELBERRY FL 327072555

*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:** CRAIG HARMON

**MANAGING MEMBER**

**02/22/2025**

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

\_\_\_\_\_  
Date