

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000048281

**Entity Name:** A B LAWN SERVICES LLC

**Current Principal Place of Business:**

3193 NW 216TH ST  
LAWTEY, FL 32058

**Current Mailing Address:**

11250 OLD ST. AUGUSTINE RD.  
# 15-393  
JACKSONVILLE, FL 32257 US

**FEI Number:** 47-3533259

**Certificate of Status Desired:** No

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

WILKISON, BENNETT L III  
3193 NW 216TH ST  
LAWTEY, FL 32058 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:** BENNETT L WILKISON, III

04/16/2024

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

|                 |                         |                 |                    |
|-----------------|-------------------------|-----------------|--------------------|
| Title           | MGRM                    | Title           | MGR                |
| Name            | WILKISON, BENNETT L III | Name            | WILKISON, DIANNA L |
| Address         | 3193 NW 216TH ST        | Address         | 3193 NW 216TH ST   |
| City-State-Zip: | LAWTEY FL 32058         | City-State-Zip: | LAWTEY FL 32058    |
|                 |                         |                 |                    |
| Title           | MGR                     |                 |                    |
| Name            | WILKISON, DILLON L      |                 |                    |
| Address         | 3193 NW 216TH ST        |                 |                    |
| City-State-Zip: | LAWTEY FL 32058         |                 |                    |

*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:** DIANNA L WILKISON

MGR

04/16/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date