

**2009 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED  
Mar 19, 2009  
Secretary of State**

DOCUMENT# L04000052756

Entity Name: NEW LIFE LAWN CARE, LLC

**Current Principal Place of Business:**

**New Principal Place of Business:**

2525 TOUPS TRAIL  
TITUSVILLE, FL 32780 US

**Current Mailing Address:**

**New Mailing Address:**

2525 TOUPS TRAIL  
TITUSVILLE, FL 32780 US

FEI Number: 00-5609548      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

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

VILLAVERDA, SHARON  
2525 TOUPS TRAIL  
TITUSVILLE, FL 32780 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

**MANAGING MEMBERS/MANAGERS:**

**ADDITIONS/CHANGES:**

Title: MGRM ( ) Delete  
Name: THIBEAU, JEFFREY W  
Address: 2525 TOUPS TRAIL  
City-St-Zip: TITUSVILLE, FL 32780 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGRM ( ) Delete  
Name: THIBEAU, CELESTE  
Address: 2525 TOUPS TRAIL  
City-St-Zip: TITUSVILLE, FL 32780 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: JEFFREY W. THIBEAU      MGRM      03/19/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date