

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000011420

FILED
Mar 16, 2010
Secretary of State

Entity Name: TSCHIDA'S NURSERY & LAWN SERVICE, LLC

Current Principal Place of Business:

3970 POLK CITY RD
HAINES CITY, FL 33844

New Principal Place of Business:

Current Mailing Address:

3970 POLK CITY RD
HAINES CITY, FL 33844

New Mailing Address:

FEI Number: 20-4319970

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TSCHIDA, JAMES
3970 POLK CITY RD
HAINES CITY, FL 33844 US

Name and Address of New Registered Agent:

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:

Title: MGRM
Name: TSCHIDA, JAMES
Address: 3970 POLK CITY RD
City-St-Zip: HAINES CITY, FL 33844

Title: MGRM
Name: TSCHIDA, SHERRY
Address: 3970 POLK CITY RD
City-St-Zip: HAINES CITY, FL 33844

I hereby 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: JAMES TSCHIDA

MGRM

03/16/2010

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