

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000082721

FILED  
Mar 20, 2009  
Secretary of State

**Entity Name:** NICE GRASS LAWN SERVICE, L.L.C.

**Current Principal Place of Business:**

5030 WHITEWATER WAY  
ST CLOUD, FL 34771

**New Principal Place of Business:**

**Current Mailing Address:**

5030 WHITEWATER WAY  
ST CLOUD, FL 34771

**New Mailing Address:**

**FEI Number:** 42-1650943

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GERSHMAN, AMY  
5030 WHITEWATER WAY  
ST. CLOUD, FL 34771 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 ( ) Delete  
Name: GERSHMAN, BARRY S  
Address: 5030 WHITEWATER WAY  
City-St-Zip: ST. CLOUD, FL 34771

Title: MGRM ( ) Delete  
Name: GERSHMAN, AMY  
Address: 5030 WHITEWATER WAY  
City-St-Zip: ST. CLOUD, FL 34771

**ADDITIONS/CHANGES:**

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

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: AMY GERSHMAN

MGR

03/20/2009

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