

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000049088

Entity Name: TREATY OAK LAWN CARE LLC

FILED
Mar 19, 2009
Secretary of State

Current Principal Place of Business:

551 CHARLES PINCKNEY
STREET
ORANGE PARK, FL 32073 US

Current Mailing Address:

PO BOX 65806
ORANGE PARK, FL 32065

New Principal Place of Business:

4210 APPALOOSA RD.
MIDDLEBURG, FL 32068 US

New Mailing Address:

4210 APPALOOSA RD.
MIDDLEBURG, FL 32068 US

FEI Number: 41-2235801

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STREET, STEVEN C
551 CHARLES PINCKNEY
ORANGE PARK, FL 32073 US

Name and Address of New Registered Agent:

HICKMAN, LARRY L MGRM
4210 APPALOOSA RD.
MIDDLEBURG, FL 32068 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: LARRY L. HICKMAN

03/19/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: STREET, STEVEN C
Address: 551 CHARLES PINCKNEY
City-St-Zip: ORANGE PARK, FL 32073 US

Title: MGRM (X) Delete
Name: HICKMAN, LARRY L
Address: 4210 APPALOOSA RD.
City-St-Zip: MIDDLEBURG, FL 32068 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: HICKMAN, LARRY L MGRM
Address: 4210 APPALOOSA RD.
City-St-Zip: MIDDLEBURG, FL 32068 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: LARRY L. HICKMAN

MGRM

03/19/2009

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