

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000060837

FILED  
Apr 28, 2009  
Secretary of State

Entity Name: MY TWO SONS LAWN & LANDSCAPING LLC

**Current Principal Place of Business:**

313 SW FILM STREET  
PORT ST LUCIE, FL 34953 US

**New Principal Place of Business:**

474 PENINSULA DR  
FORT PIERCE, FL 34946 US

**Current Mailing Address:**

313 SW FILM STREET  
PORT ST LUCIE, FL 34953 US

**New Mailing Address:**

474 PENINSULA DR  
FORT PIERCE, FL 34946 US

FEI Number: 20-5046163

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

TOWNSEND, ERIC J  
313 SW FILM STREET  
PORT ST LUCIE, FL 34953 US

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

TOWNSEND, CATHY  
474 PENINSULA DR  
FORT PIERCE, FL 34946 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: CATHY TOWNSEND

04/28/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: TOWNSEND, ERIC J  
Address: 313 SW FILM STREET  
City-St-Zip: PORT ST LUCIE, FL 34953 US

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: TOWNSEND, CATHY  
Address: 474 PENINSULA DR  
City-St-Zip: FORT PIERCE, FL 34946 US

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: CATHY TOWNSEND

MGR

04/28/2009

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