

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000014993

FILED
Apr 20, 2009
Secretary of State

Entity Name: CURA CARE LAWN SERVICE, L.L.C.

Current Principal Place of Business:

6006 NORTH 22ND STREET
TAMPA, FL 33610

New Principal Place of Business:

Current Mailing Address:

6006 NORTH 22ND STREET
TAMPA, FL 33610

New Mailing Address:

FEI Number: 20-8450325

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CURA, DAVID A
6006 NORTH 22ND STREET
TAMPA, FL 33610 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: CURA, DAVID A
Address: 6006 NORTH 22ND STREET
City-St-Zip: TAMPA, FL 33610

Title: MGRM () Delete
Name: CURA, MARCOS B
Address: 6006 NORTH 22ND STREET
City-St-Zip: TAMPA, FL 33610

Title: MGRM () Delete
Name: CURA, ELIAS
Address: 6006 NORTH 22ND STREET
City-St-Zip: TAMPA, FL 33610

ADDITIONS/CHANGES:

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

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: MARCOS B CURA

MGR

04/20/2009

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