

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000022399

FILED  
Feb 17, 2009  
Secretary of State

Entity Name: NATURE COAST SERVICES, LLC

**Current Principal Place of Business:**

1400 JOHNSON-STRIPLING ROAD  
PERRY, FL 32347

**New Principal Place of Business:**

**Current Mailing Address:**

1400 JOHNSON-STRIPLING ROAD  
PERRY, FL 32347

**New Mailing Address:**

FEI Number: 20-8550774

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

WIENER, WENDY R ESQ  
MANG LAW FIRM P.A.  
660 EAST JEFFERSON STREET  
TALLHASSEE, FL 32301 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: MURROW, TOMMY  
Address: 1400 JOHNSON-STRIPLING ROAD  
City-St-Zip: PERRY, FL 32347

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

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

Title: MGRM ( ) Change (X) Addition  
Name: GREEN, STEVE  
Address: 1400 JOHNSON STRIPLING RD.  
City-St-Zip: PERRY, FL 32347

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: TOMMY MURROW

MGRM

02/17/2009

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