

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000040288

**Entity Name:** TLC SILT FENCE, LLC

**FILED**  
**May 04, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

22045 POLLYWOG ROAD SOUTHWEST  
LABELLE, FL 33935

**New Principal Place of Business:**

**Current Mailing Address:**

POST OFFICE BOX 1112  
LABELLE, FL 33935

**New Mailing Address:**

**FEI Number:** 20-8924720      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

LUCKEY, JAMES O ESQ  
90 HOWE AVE  
LABELLE, FL 33935      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:** MRS  
**Name:** HICKS, TAMMY L OWNER  
**Address:** POST OFFICE BOX 2233  
**City-St-Zip:** LABELLE, FL 33975

I hereby 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: TAMMY L HICKS

OWNE

05/04/2010

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