

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000060375

FILED
Jan 13, 2009
Secretary of State

Entity Name: IMMACULATE LANDSCAPE AND LAWN CARE, LLC

Current Principal Place of Business:

7500 COMMERCE CENTER DR
ORLANDO, FL 32811 US

New Principal Place of Business:

10119 CANOPY TREE CT.
ORLANDO, FL 32836 US

Current Mailing Address:

10119 CANOPY TREE CT
ORLANDO, FL 32836 US

New Mailing Address:

FEI Number: 26-0308169 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

DENNIS M BALLARD ESQUIRE
212 DUBLIN DR
LAKE MARY, FL 32746 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: MGR () Delete
Name: BATTLA, KASHIF
Address: 10119 CANOPY TREE CT
City-St-Zip: ORLANDO, FL 32836 US

Title: MGR (X) Delete
Name: BATTLA, MARIA
Address: 10119 CANOPY TREE CT
City-St-Zip: ORLANDO, FL 32836 US

ADDITIONS/CHANGES:

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: KASHIF BATTLA

MR.

01/13/2009

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