

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000068485

Entity Name: T-TWO GROVE CARE LLC

FILED  
Mar 02, 2009  
Secretary of State

**Current Principal Place of Business:**

1035 CHALET SUZANNE ROAD  
LAKE WALES, FL 33859

**New Principal Place of Business:**

**Current Mailing Address:**

P. O. BOX 970  
DUNDEE, FL 33838

**New Mailing Address:**

FEI Number: 26-1516145

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

THAYER, THOMAS A JR.  
3305 EAGLE TRACE  
WINTER HAVEN, FL 33884 US

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

THAYER, THOMAS A JR.  
1895 ELOISE LOOP ROAD  
WINTER HAVEN, FL 33884 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:

03/02/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: THAYER, THOMAS A JR.  
Address: 3305 EAGLE TRACE  
City-St-Zip: WINTER HAVEN, FL 33884

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: THAYER, THOMAS A JR.  
Address: 1895 ELOISE LOOP ROAD  
City-St-Zip: WINTER HAVEN, FL 33884

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: THOMAS A THAYER JR

MGR

03/02/2009

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