2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 28, 2009
Secretary of State

DOCUMENT# L08000005033

Entity Name: CRITTER SITTER, LLC

Current Principal Place of Business:

4040 N JENNINGS RD
HAINES CITY, FL 33844

New Principal Place of Business:

Current Mailing Address:

PO BOX 944
INTERCESSION CITY, FL 33848

New Mailing Address:

4040 N JENNINGS RD
HAINES CITY, FL 33844

FEI Number: 25-1745930 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

CLARK, NICOLE E
4040 N JENNINGS RD
HAINES CITY, FL 33844 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: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MRS. ( ) Change (X) Addition
Name: CLARK, NICOLE E MRS.
Address: 4040 N. JENNINGS RD
City-St-Zip: HAINES CITY, FL 33844 US

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: NICOLE CLARK MRS. 04/28/2009

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