2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 06, 2009
Secretary of State

DOCUMENT# L08000019765

Entity Name: TREE DOCTOR OF COLLIER COUNTY, LLC

Current Principal Place of Business:

982 13TH STREET NORTH
NAPLES, FL 34102 US

New Principal Place of Business:

1134 BROAD AVE. N.
NAPLES, FL 34102 US

Current Mailing Address:

P. O. BOX 10252
NAPLES, FL 34101 US

New Mailing Address:

FEI Number: 45-0589322 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LAUFER, GREGGORY J
982 13TH STREET NORTH
NAPLES, FL 34102 US

Name and Address of New Registered Agent:

LAUFER, GREGGORY J
1134 BROAD AVE. N.
NAPLES, FL 34102 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: _____ 02/06/2009
Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: LAUFER, GREGGORY J
Address: 982 13TH STREET NORTH
City-St-Zip: NAPLES, FL 34102 US

Title: MGRM ( ) Delete
Name: MRL HOLDINGS TRUST,
Address: P. O. BOX 10252
City-St-Zip: NAPLES, FL 34101 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: LAUFER, GREGGORY J
Address: 1134 BROAD AVE. N.
City-St-Zip: NAPLES, FL 34102 US

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: GREGGORY J. LAUFER PRES 02/06/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date