

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000043577

FILED  
May 06, 2009  
Secretary of State

Entity Name: NEW BEGINNINGS LAWN CARE L.L.C.

**Current Principal Place of Business:**

1800 OLD MOODY BLVD., STE. 1  
BUINNELL, FL 32110

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 351522  
PALM COAST, FL 32135

**New Mailing Address:**

FEI Number: 26-2394931      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:**

GORDON, BOB  
3 KALVERTON COURT  
PALM COAST, FL 32164      US

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

GORDON, BOB  
7 ZAMMER COURT  
PALM COAST, FL 32164      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: BOB GORDON

05/06/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR      ( ) Delete  
Name: GORDON, BOB  
Address: 3 KALVERTON COURT  
City-St-Zip: PALM COAST, FL 32164

**ADDITIONS/CHANGES:**

Title: MGR      (X) Change      ( ) Addition  
Name: GORDON, BOB  
Address: 7 ZAMMER COURT  
City-St-Zip: PALM COAST, FL 32164

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: BOB GORDON

MGR

05/06/2009

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