

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000104252

FILED
Apr 26, 2009
Secretary of State

Entity Name: CORE LAWN SERVICE LLC

Current Principal Place of Business:

6438 TOWHLEN RD
NORTH PORT, FL 34287

New Principal Place of Business:

6438 TOWHLEN RD
NORTH PORT, FL 34291 US

Current Mailing Address:

6438 TOWHLEN RD
NORTH PORT, FL 34287

New Mailing Address:

6438 TOWHLEN RD
NORTH PORT, FL 34291 US

FEI Number: 26-3673906

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALLGAIER, ALICE L
6438 TOWHLEN RD
NORTH PORT, FL 34287 US

Name and Address of New Registered Agent:

ALLGAIER, ALICE L
6438 TOWHLEN RD
NORTH PORT, FL 34291 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:

04/26/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: ALLGAIER, ALICE L
Address: 6438 TOWHLEN
City-St-Zip: NORTH PORT, FL 34287

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: ALLGAIER, ALICE L
Address: 6438 TOWHLEN
City-St-Zip: NORTH PORT, FL 34291 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: ALICE L. ALLGAIER

PRES

04/26/2009

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