

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000026653

**FILED**  
**Apr 05, 2010**  
**Secretary of State**

**Entity Name:** TWIN OAKS SILT FENCING, LLC

**Current Principal Place of Business:**

1611 WALNUT AVENUE  
WINTER PARK, FL 32789 US

**New Principal Place of Business:**

3231 GENERAL ELECTRIC RD  
2  
APOPKA, FL 32768 US

**Current Mailing Address:**

1611 WALNUT AVENUE  
WINTER PARK, FL 32789 US

**New Mailing Address:**

PO BOX 57  
WINTER PARK, FL 32790 US

**FEI Number:** 26-4622803

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BURST, THOMAS C  
1611 WALNUT AVENUE  
WINTER PARK, FL 32789 US

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

BURST, LAURA A  
1520 MAGNOLIA AVE  
WINTER PARK, FL 32789 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: LAURA A. BURST

04/05/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: BURST, LAURA A  
Address: 1611 WALNUT AVENUE  
City-St-Zip: WINTER PARK, FL 32789 US

Title: MGRM  
Name: BURST, MICHELE G  
Address: 19642 RED MAPLE LANE  
City-St-Zip: JUPITER, FL 33458 US

Title: MGRM  
Name: BURST WOOD, CATHERINE  
Address: 2312 MOHAWK TRAIL  
City-St-Zip: MAITLAND, FL 32751 US

I hereby 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: LAURA A. BURST

MGRM

04/05/2010

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