

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000071246

Entity Name: ADEQUATE LAWN CARE, LLC

**FILED**  
**Jul 15, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

5325 8TH AVE S.  
GULFPORT, FL 33707

**New Principal Place of Business:**

3806 6TH AVENUE NORTH  
SAINT PETERSBURG, FL 33713

**Current Mailing Address:**

5325 8TH AVE S.  
GULFPORT, FL 33707

**New Mailing Address:**

3806 6TH AVENUE NORTH  
SAINT PETERSBURG, FL 33713

FEI Number: 27-2985847

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DAVID C HASTINGS, CPA, PA  
2207 54TH ST S  
GULFPORT, FL 33707 US

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

KAYE, JUSTIN E  
3806 6TH AVENUE NORTH  
SAINT PETERSBURG, FL 33713 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: JUSTIN E. KAYE

07/15/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: KAYE, JUSTIN E  
Address: 3806 6TH AVENUE NORTH  
City-St-Zip: SAINT PETERSBURG, FL 33713

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: JUSTIN E. KAYE

MGRM

07/15/2011

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