

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M04000004769

**FILED**  
**Feb 17, 2010**  
**Secretary of State**

**Entity Name:** CARR SPRINGS, LLC

**Current Principal Place of Business:**

200 S MAIN ST.  
CASSVILLE, MO 65625

**New Principal Place of Business:**

**Current Mailing Address:**

200 S MAIN ST.  
P O BOX 280  
CASSVILLE, MO 65625

**New Mailing Address:**

**FEI Number:** 43-1870604

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CARR, JAMES  
6909 NW LTC PARKWAY  
PORT SAINT LUCIE, FL 34986 US

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

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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** CARR, MICHAEL  
**Address:** P.O. BOX 280  
**City-St-Zip:** CASSVILLE, MO 65625

**Title:** MGRM  
**Name:** CARR, JAMES  
**Address:** 6909 NW LTC PARKWAY  
**City-St-Zip:** PORT SAINT LUCIE, FL 34986

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:** MICHAEL L CARR

MGRM

02/17/2010

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