

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M07000001377

FILED  
Apr 15, 2008  
Secretary of State

Entity Name: THE BRICKMAN GROUP LTD LLC

**Current Principal Place of Business:**

18227 FLOWER HILL WAY  
STE D  
GAITHERSBURG, MD 20879

**New Principal Place of Business:**

**Current Mailing Address:**

18227 FLOWER HILL WAY  
STE D  
GAITHERSBURG, MD 20879

**New Mailing Address:**

FEI Number: 42-1724313      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

CT CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MR ( ) Change (X) Addition  
Name: BRICKMAN, SCOTT  
Address: 18227 FLOWER HILL WAY, SUITE D  
City-St-Zip: GAITHERSBURG, MD 20879

Title: MR. ( ) Change (X) Addition  
Name: HJELLE, MARK  
Address: 18227 FLOWER HILL WAY, SUITE D  
City-St-Zip: GAITHERSBURG, MD 20879

Title: MR. ( ) Change (X) Addition  
Name: SKARUPA, ANTHONY  
Address: 18227 FLOWER HILL WAY, SUITE D  
City-St-Zip: GAITHERSBURG, MD 20879

Title: MR ( ) Change (X) Addition  
Name: TYLER, ROBERT  
Address: 18227 FLOWER HILL WAY, SUITE D  
City-St-Zip: GAITHERSBURG, MD 20879

Title: MR ( ) Change (X) Addition  
Name: OBLACZYNSKI, JOHN  
Address: 2260 WEST CABOT BLVD., SUITE 300  
City-St-Zip: LANGHORNE, PA 19047

Title: MR. ( ) Change (X) Addition  
Name: POLOZIE, STEPHEN  
Address: 18227 FLOWER HILL WAY, SUITE D  
City-St-Zip: GAITHERSBURG, MD 20879

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: STEPHEN POLOZIE

MR.

04/15/2008

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