

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000009800

**FILED**  
**Jan 28, 2019**  
**Secretary of State**  
**2675587856CC**

**Entity Name:** TOWNS' GARDEN CENTER, LLC.

**Current Principal Place of Business:**

5589 LAKE HOWELL ROAD  
WINTER PARK, FL 32792

**Current Mailing Address:**

5589 LAKE HOWELL ROAD  
WINTER PARK, FL 32792

**FEI Number:** 27-1485751

**Certificate of Status Desired:** Yes

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

ELLIS, ANDREA N  
5589 LAKE HOWELL RD  
WINTER PARK, FL 32792 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name ELLIS, TOWNS H  
Address 5589 LAKE HOWELL RD.  
City-State-Zip: WINTER PARK FL 32792

Title MGR  
Name ELLIS, ANDREA N  
Address 5589 LAKE HOWELL RD.  
City-State-Zip: WINTER PARK FL 32792

Title OFFICE MANAGER  
Name BARKWILL, DAVID  
Address 5589 LAKE HOWELL ROAD  
City-State-Zip: WINTER PARK FL 32792

*I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** TOWNS ELLIS

**MANAGING MEMBER**

**01/28/2019**

Electronic Signature of Signing Authorized Person(s) Detail

Date