

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000245372

Entity Name: HANDCART ROAD NURSERY, LLC

Current Principal Place of Business:

30435 COMMERCE DRIVE
SUITE 102
SAN ANTONIO, FL 33576

Current Mailing Address:

30435 COMMERCE DRIVE
SUITE 102
SAN ANTONIO, FL 33576 US

FEI Number: 92-0290421

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RAINS, JOHN H III
501 E. KENNEDY BLVD.
SUITE 750
TAMPA, FL 33602 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 FAULKNER, JOHN M SR.
Address 30435 COMMERCE DRIVE
SUITE 102
City-State-Zip: SAN ANTONIO FL 33576

Title AMBR
Name FAULKNER FAMILY REVOCABLE
TRUST
Address 30435 COMMERCE DRIVE
SUITE 102
City-State-Zip: SAN ANTONIO FL 33576

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: JOHN M FAULKNER

MANAGER

02/06/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date