

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000006853

FILED
Jan 20, 2005
Secretary of State

Entity Name: HIGHLANDS COUNTY NURSERY, L.L.C.

Current Principal Place of Business:

10880 N.W. 30TH STREET
MIAMI, FL 33172

New Principal Place of Business:

Current Mailing Address:

10880 N.W. 30TH STREET
MIAMI, FL 33172

New Mailing Address:

FEI Number: 45-0475959

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GARDNER, MERRITT A
401 EAST JACKSON STREET
SUITE 2650
TAMPA, FL 33602 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/MEMBERS:

Title: MGRM () Delete
Name: MACKLE, FRANK E PRES.
Address: 10880 NW 30 STREET
City-St-Zip: MIAMI, FL 33172 US

Title: MGRM () Delete
Name: MACKLE, JOHN C PRES.
Address: 7111 SW 92 STREET
City-St-Zip: PINECREST, FL 33156 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: MACKLE, FRANK E
Address: 10880 NW 30 STREET
City-St-Zip: MIAMI, FL 33172 US

Title: MGRM (X) Change () Addition
Name: MACKLE, JOHN C
Address: 7000 SW 95 STREET
City-St-Zip: PINECREST, FL 33156 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: FRANK E. MACKLE III

MGRM

01/20/2005

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