

2005 LIMITED-LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 29, 2005 08:00 AM
Secretary of State

DOCUMENT # L02000024762	
1. Entity Name HILLIARD N.P.G., LLC	



Principal Place of Business 2650 S. KINGS HIGHWAY FORT PIERCE, FL 34945	Mailing Address 2650 S. KINGS HIGHWAY FORT PIERCE, FL 34945
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01212005No Chg-LLC CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 11-3653465	Applied For Not Applicable
5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent BECHT, EDWARD W 321 SOUTH SECOND STREET FORT PIERCE, FL 34950
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**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**Filing Fee is \$50.00
Due by May 1, 2005**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR HILLIARD GROVES, INC. 2650 S KINGS HIGHWAY FORT PIERCE, FL 34945
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR GREENE CITRUS MANAGEMENT, INC. 2075 38TH AVNEUE VERO BEACH, FL 32960
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR LEROY SMITH, INC. 4776 OLD DIXIE HIGHWAY VERO BEACH, FL 32961
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR ODOM, JR., JOHN G 1611 SOUTH JENKINS ROAD FORT PIERCE, FL 34947
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

U00000204084
01/29/05-80054-024 50.00

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify 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 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: **SHERWOOD J. JOHNSON** **1/27/05** **(772)461-5791**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #