2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 10, 2006 08:00 AM
Secretary of State

DOCUMENT # L02000024762

1. Entity Name
HILLIARD N.P.G., LLC

Principal Place of Business	Mailing Address
2650 S. KINGS HIGHWAY FORT PIERCE, FL 34945	2650 S. KINGS HIGHWAY FORT PIERCE, FL 34945

DO NOT WRITE IN THIS SPACE

04062006 No Chg-LLC CR2E083 (11/05)

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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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $50.00
Due by May 1, 2006

000000500109
04/25/06-80010-014 50.00

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

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 4/7/06 (772)461-5791
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #