

04-27-2006 17:21

From-MERCURIOSBRIDGFORD

941 364 9138

T-512 P.002/007 F-421

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT****FILED****May 01, 2006 08:00 AM
Secretary of State**

DOCUMENT # L02000028840 1. Entity Name EMPIRE HORTICULTURAL SERVICES, LLC	
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Principal Place of Business 2055 WOOD ST. STE. 208 SARASOTA, FL 34237	Mailing Address 2055 WOOD ST. STE. 208 SARASOTA, FL 34237
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04272006 No Chg-LLC

CR2E053 (11/05)

DO NOT WRITE IN THIS SPACE

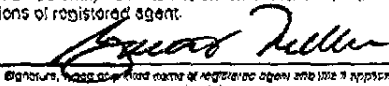
4. FEI Number 47-0894311	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent MULLEN, GRANT S 2055 WOOD ST. STE. 208 SARASOTA, FL 34237
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**DO NOT WRITE
IN THIS SPACE**

a. 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



Signature, typed or printed name of registered agent and title is appropriate.

(NOTE: Registered Agent Signature required when resigning)

DATE

4/27/06

Filing Fee is \$50.00
Due by May 1, 2006

b. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	MGRM MULLEN, GRANT 2055 WOOD ST STE 208 SARASOTA, FL 34237
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05/12/06-80010-017 50.00

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IN THIS SPACE**

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:



SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Printing Name is

4/27/06 941-365-0038