

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L02000032835

**FILED**  
**Feb 13, 2012**  
**Secretary of State**

**Entity Name:** BOYNTON BOTANICALS, L.L.C.

**Current Principal Place of Business:**

4935 WAVERLY WOODS  
LAKE WORTH, FL 33463

**New Principal Place of Business:**

**Current Mailing Address:**

4935 WAVERLY WOODS  
LAKE WORTH, FL 33463

**New Mailing Address:**

**FEI Number:** 06-1664932

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

KASTENHOLZ, KATHLEEN M M  
7935 WAVENLY WOODS TERR  
LAKE WORTH, FL 33463 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/MANAGERS:**

Title: MGRM  
Name: KASTENHOLZ, MICHAEL J  
Address: 4935 WAVERLY WOODS TERRACE  
City-St-Zip: LAKE WORTH, FL 33463

Title: MGRM  
Name: KASTENHOLZ, KATHLEEN M  
Address: 4935 WAVERLY WOODS TERRACE  
City-St-Zip: LAKE WORTH, FL 33463

I hereby 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: KATHLEEN KASTENHOLZ

MNMB

02/13/2012

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