2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 05, 2008
Secretary of State

DOCUMENT# L03000009249

Entity Name: CITY OF PALMS NURSERY, LLC

Current Principal Place of Business:

14941 CENTER ST.
FT MYERS, FL 33905

New Principal Place of Business:

14941 CENTER ST.
FT MYERS, FL 33905 LE

Current Mailing Address:

14941 CENTER ST.
FT MYERS, FL 33905

New Mailing Address:

14941 CENTER ST.
FT MYERS, FL 33905 LE

FEI Number: 26-0068152 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

STEVEN A. RAMUNNI, P.A.
1422 HENDRY ST., STE. 302
FT MYERS, FL 33901 US

Name and Address of New Registered Agent:

WEAVER, MARK E PRES
14941 CENTER ST
FT MYERS, FL 33905 US

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: MARK E WEAVER 07/05/2008
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: WEAVER, MARK E PRES
Address: 14941 CENTER ST
City-St-Zip: FT MYERS, FL 33905 US

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: MARK E WEAVER PRES 07/05/2008
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date