2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L03000018909 *

1. Entity Name GRO - PRO LLC



Principal Place of Business

2214 HWY 44 WEST INVERNESS, FL 34453 Mailing Address

PO BOX 999

INVERNESS, FL 34451 US

FILED Apr 30, 2008 08:00 AM Secretary of State



04252008 No Chg-LLC

CR2E083 (12/07)

4.	FEI Number		Applied For
	20-3646521		Not Applicable
5.	Certificate of Status Desired	\$5.0	Additional

6. Name and Address of Current Registered Agent

GROW, JEFFERY R 2227 EAST HOMPSHIRE ST INVERNESS, FL 34453

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8.	3. 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 tritle it applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75

000000936293 05/27/08-80005-002 138.75

1			
9. MANAGING MEMBERS/MANAGERS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM GROW, JEFFERY R 1492 E. ALLEGRIE INVERNESS, FL 34453		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM CANADY, RANDALL V 4429 LAKE FLOWER DRIVE HOLLY SPRINGS, NC 27540		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS			

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11. I hereby certify that the information supplied with this filling 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

Rondall V. Canaly 4/

8 99-342-517

Daytime Phone ≱