

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000024023

Entity Name: STONEY FIELD HERBS, LLC

FILED
Jan 13, 2006
Secretary of State

Current Principal Place of Business:

1900 S. OLIVE AVENUE
WEST PALM BEACH, FL 33401

New Principal Place of Business:

Current Mailing Address:

1900 S. OLIVE AVENUE
WEST PALM BEACH, FL 33401

New Mailing Address:

FEI Number: 57-1184586

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MACKEY, BONNIE T
1900 S. OLIVE AVENUE
WEST PALM BEACH, FL 33401 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: MGR () Delete
Name: MACKEY, BONNIE T
Address: 1900 S. OLIVE AVENUE
City-St-Zip: WEST PALM BEACH, FL

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: MACKEY, BONNIE T
Address: 1900 S. OLIVE AVENUE
City-St-Zip: WEST PALM BEACH, FL 33401 US

Title: MGRM () Change (X) Addition
Name: MACKEY, MARY E
Address: 1900 S. OLIVE AVENUE
City-St-Zip: WEST PALM BEACH, FL 33401 US

I hereby certify that the information supplied with this filing does not qualify for the 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: BONNIE T. MACKEY

MGR

01/13/2006

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