

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 25, 2005 8:00 am
Secretary of State

04-25-2005 90104 004 ****50.00

DOCUMENT # L03000053526

1. Entity Name
F.H. GREEN PROPERTIES, L.L.C.



Principal Place of Business
4350 U.S. HIGHWAY 1
PALM BAY, FL 32905

Mailing Address
4350 U.S. HIGHWAY 1
PALM BAY, FL 32905

20045597



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01072005 Chg-LLC CR2E083 (10/03)

City & State

City & State

4. FEI Number
20-0479169

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

FRESE, GARY B
930 S. HARBOR CITY BLVD., SUITE 505
MELBOURNE, FL 32901

Name Frances H. Green

Street Address (P.O. Box Number is Not Acceptable)

4350 Dixie Highway NE

City Palm Bay

FL

Zip Code 32905

8. 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

Frances H. Green

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4/21/05

DATE

Filing Fee is \$50.00
Due by May 1, 2005

Make check payable to
Florida Department of State

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE
NAME MGRM
STREET ADDRESS GREEN, FRANCESE H
CITY-ST-ZIP 4350 DIXIE HIGHWAY NE
PALM BAY, FL 32905 ☐ Delete

TITLE
NAME MGRM
STREET ADDRESS GREEN, FRANCES H
CITY-ST-ZIP 4350 Dixie Highway NE
PALM BAY, FL 32905 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
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STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

Frances H. Green

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

4/21/05

Date

Daytime Phone #