

**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 30, 2005 08:00 AM
Secretary of State

DOCUMENT # L04000000254

1. Entity Name
BOTANY PROPERTIES, LLC



Principal Place of Business
**3 RIDLEY COURT
GLEN RIDGE, NJ 07028**

Mailing Address
**3 RIDLEY COURT
GLEN RIDGE, NJ 07028**

DO NOT WRITE IN THIS SPACE



04272005 No Chg-LLC

CR2E083 (10/03)

4. FEI Number
NOT APPLICABLE

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**COHEN, GREGORY R
712 U.S. HIGHWAY ONE, STE 400
NORTH PALM BEACH, FL 33408**

**DO NOT WRITE
IN THIS SPACE**

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 _____

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

(NOTE: Registered Agent signature required when reinstating)

DATE _____

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

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	DAY, JOHN C
STREET ADDRESS	3 RIDLEY COURT
CITY-ST-ZIP	GLEN RIDGE, NJ 07028
TITLE	MGRM
NAME	JANDURA, TADEUSZ
STREET ADDRESS	3 RIDLEY COURT
CITY-ST-ZIP	GLEN RIDGE, NJ 07028
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000350029
05/02/05-80088-013 50.00

**DO NOT WRITE
IN THIS SPACE**

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:

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

Date

Daytime Phone #

John C Day *John C Day* 4/29/05 973-715-8069