

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000020651

**FILED**  
**Jan 11, 2010**  
**Secretary of State**

**Entity Name:** DONALDSON FOLIAGE, LLC

**Current Principal Place of Business:**

23800 LAKE CHANCELLOR DR  
SORRENTO, FL 32776

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 840  
ZELLWOOD, FL 32798

**New Mailing Address:**

**FEI Number:** 56-2449596

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

DONALDSON, WILLIAM R  
5563 ROUND LAKE ROAD  
APOPKA, FL 32712 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:** MGRM  
**Name:** DONALDSON, WILLIAM R  
**Address:** 5563 ROUND LAKE RD  
**City-St-Zip:** APOPKA, FL 32712

**Title:** MGRM  
**Name:** DONALDSON, KAREN E  
**Address:** 5563 ROUND LAKE RD.  
**City-St-Zip:** APOPKA, FL 32712

**Title:** MGR  
**Name:** DONALDSON, SCOTT A  
**Address:** 5533 HURON STREET  
**City-St-Zip:** MOUNT DORA, FL 32757

I hereby 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:** SCOTT DONALDSON

MGR

01/11/2010

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