2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jun 30, 2005
Secretary of State

DOCUMENT# L04000042459

Entity Name: GO NATIVE, LLC

Current Principal Place of Business:

5332 TWIN CREEKS DRIVE
VALRICO, FL 33594

New Principal Place of Business:

Current Mailing Address:

5332 TWIN CREEKS DRIVE
VALRICO, FL 33594

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

ZEILLER, TODD
5332 TWIN CREEKS DRIVE
VALRICO, FL 33594 US

Name and Address of New Registered Agent:

TODD, ZEILLER
5332 TWIN CREEKS DR
VALRICO, FL 33594 US

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: TODD ZEILLER 06/30/2005
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: ZEILLER, TODD
Address: 5332 TWIN CREEKS DRIVE
City-St-Zip: VALRICO, FL 33594

ADDITIONS/CHANGES:

Title: MR (X) Change ( ) Addition
Name: ZEILLER, TODD
Address: 5332 TWIN CREEKS DR
City-St-Zip: VALRICO, FL 33594

I hereby certify that the information supplied with this filing does not qualify for the 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 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: TODD ZEILLER DIR 06/30/2005
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date