2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 09, 2007
Secretary of State

DOCUMENT# L04000056919

Entity Name: ENCHANTED GROVE, LLC

Current Principal Place of Business:

263 N.E. 8TH STREET
HOMESTEAD, FL 33030

New Principal Place of Business:

Current Mailing Address:

263 N.E. 8TH STREET
HOMESTEAD, FL 33030

New Mailing Address:

5137 N. SCENIC HWY
LAKE WALES, FL 33898

FEI Number: 20-1435660 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CARR, REVON
5137 N SOCAC HWY
LAKE WHALES, FL 33878 US

Name and Address of New Registered Agent:

CARR, BRIAN
5137 N SCENIC HWY
LAKE WALES, FL 33898 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: BRIAN CARR 01/09/2007
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: DEL VECCHIO, PATRICK
Address: 263 NORTHEAST 8 STREET
City-St-Zip: HOMESTEAD, FL 33030

Title: MGR ( ) Delete
Name: CARR, BRIAN
Address: 517 W SOCAC HWY
City-St-Zip: LAKE WHALES, FL 33878

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: MGR (X) Change ( ) Addition
Name: CARR, BRIAN
Address: 5137 N. SCENIC HWY
City-St-Zip: LAKE WALES, FL 33898

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: BRIAN CARR MGRM 01/09/2007
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date