2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 17, 2006
Secretary of State

DOCUMENT# L04000086379

Entity Name: LOXAHATCHEE NURSERY GROWERS, LLC

Current Principal Place of Business:

C/O 1645 PALM BEACH LAKES BLVD., STE 1200
WEST PALM BEACH, FL 33401

New Principal Place of Business:

Current Mailing Address:

C/O 1645 PALM BEACH LAKES BLVD., STE 1200
WEST PALM BEACH, FL 33401

New Mailing Address:

FEI Number: 20-2232303 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ARMOUR, ALAN I II
1645 PALM BEACH LAKES BLVD., SUITE 1200
WEST PALM BEACH, FL 33401 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: MEMB ( ) Delete
Name: HADDEN, JOHN M
Address: 4045 GEM LAKE DRIVE
City-St-Zip: WEST PALM BEACH, FL 33406

Title: MEMB (X) Delete
Name: PBG REALTY, LLC,
Address: 6534 ROCK CREEK DRIVE
City-St-Zip: LAKE WORTH, FL 33467

ADDITIONS/CHANGES:

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

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

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: JOHN M. HADDEN MGRM 01/17/2006
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date