

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000088037

**FILED**  
**Feb 18, 2008**  
**Secretary of State**

**Entity Name:** NORDMAN ORNAMENTAL NURSERY LLC

**Current Principal Place of Business:**

310 WEST INTERNATIONAL SPEEDWAY BOULEVARD  
DELAND, FL 32720

**New Principal Place of Business:**

**Current Mailing Address:**

230 VIOLETWOOD ROAD  
DELAND, FL 32720

**New Mailing Address:**

FEI Number: 20-2024074

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SPINA, JEFF S  
230 VIOLETWOOD ROAD  
DELAND, FL 32720 US

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

SPINA, JEFFREY S  
230 VIOLETWOOD ROAD  
DELAND, FL 32720 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: JEFFREY S SPINA

02/18/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: NORDMAN, LEE R  
Address: 610 LAKE DRIVE  
City-St-Zip: DELAND, FL 32720

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

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

Title: MGR ( ) Change (X) Addition  
Name: SPINA, JEFFREY S  
Address: 230 VIOLETWOOD ROAD  
City-St-Zip: DELAND, FL 32720

I hereby certify that the information supplied with this filing does not qualify 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: JEFFREY S SPINA

MGR

02/18/2008

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