FILED Feb 12, 2007 8:00 am Secretary of State

ANNUAL REPORT

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DOCUMENT # L05000006231							02-12-2007	90300 (36 ****5	0.00
1. Entity Name										
217 HIBISCUS LLC.										
Principal Plac	no of Business		Mailing Addropp			υυυ	111444			
	Principal Place of Business Mailing Address 1311 COMMERCE LANE 1311 COMMERCE LANE									
#23 #23										
JUPITER, FL 33458 US JUPITER, FL 33458 US						1 12 21 21 21	1 2012(\$1)# 22() 22() 22	M 88III 88N8 8)]](4 	
2. Principal P	Place of Busin	ess - No P.O. Box #	3. Mailing Address							
	lace of Dasiff	140 T.O. BOX W		dianter	an Rel		4,9101 91111 98111 98111 98	1 		
Suite, Apt.	. #, etc.		Suite, Apt. #, etc.			01262007	Chg-LLC	CDSE	083 (12/06)	
07-10-1-1			Suite # Sle-269				-	UNZE		
City & Stat	ie.		City & State Tunter fl			4. FEI Numb 33-110	-			oplied For ot Applicable
Zip	-	Country	Zip	Country		-	·		\$5.00 Add	
			33458	ÚSA		5. Certificate	of Status Desired	□	Fee Require	
	6. Name	and Address of Current F	Registered Agent			7. Name and	Address of New F	Registered	Agent	
GREENE,	MARK			Name						
1311 COM	MERCE L	ANE		Street	Address (i	P.O. Box Numb	er is Not Acceptabl	e)		
#23	EL ELOBI	DA					 .			
JUPITER,	FL FLORI	-DA		-						
				City				FL	- 1	
8. The above	named entity	submits his statement for	the purpose of changing its re	gistered office	or register	ed agent, or bo	th, in the State of Fl	orida. I am	familiar with,	and accept
trie obligat	uons or registe	1111-7 ·								
SIGNATURE .	Signatuse, typed o	or printed name of registered agent as	nd title if applicable. [NOTE:	Registered Agent sagn	sture required	when reinstating)		DATE		
		<u> </u>	Γ		-					
Fi	iling Fee i	\$50.00					Mak	e check p	ayable to	
D	ue by May	1, 2007					Florid	a Departn	ent of State	e
9.		MANAGING MEMBER	.L	10.			ADDITIONS	/CHANGES		
TITLE	MGRM		☐ Delete	TITLE					☐ Change	Addition
NAME	GREENE, MARK H 18329 LOXAHATCHEE RIVER ROAD STR									
STREET ADDRESS CITY-ST-ZIP	JUPITER,	STREET ADDRESS CITY-ST-ZIP								
TITLE	MGRM	1 2 3 3 4 3 0	Delete	TITLE	-				□ Ch	T Large
NAME		R, MICHAEL R	C Delete	NAME					□ Change	☐ Addition
STREET ADDRESS	13174 150	TH COURT NORTH		STREET ADDRESS						1
City-St-ZIP	JUPITER,	FL 33478		CITY-ST-ZIP						
TITLE			☐ Delete	TITLE					Change	☐ Addition
NAME STREET ADDRESS				NAME STREET ADDR E SS	1					
CITY-ST-ZIP				CITY-ST-ZIP						
TITLE			☐ Delete	TITLE	1				☐ Change	☐ Addition
NAME				NAME						_
STREET ADDRESS CITY-ST-ZIP				STREET ADDRESS						}
CIIT-SI-ZIP	1			CITY-ST-ZIP						
					+				_	Addition
TITLE			☐ Delete	TITLE		,			Change	L ACCIDION
TITLE NAME STREET ADDRESS		(☐ Delete					·	☐ Change	
NAME			☐ Delete	TITLE NAME					☐ Change	Acquisin
NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete	TITLE NAME STREET ADDRESS					☐ Change	☐ Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME				TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME						
NAME STREET ADDRESS CITY-ST-ZIP				TITLE NAME STREET ADDRESS CITY-ST-ZIP						
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	certify that the	information supplied with	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	contained	in Chapter 119	Florida Statutes 11	urther certif	☐ Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	certify that the	e information supplied with is true and accurate appl y or the receiver or trustees	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	contained eet as if m	in Chapter 119, ade under oat ler 608. Florida	Florida Statutes. I f ; that I am a mana: Statutes.	urther certif	☐ Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	certify that the	e information supplied with t is true and accurate apply y or the receiver of trustees	☐ Defete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	contained ect as if n	in Chapter 119, ade under oath ter 608, Florida	Florida Statutes. I f r; that I am a mana Statutes.	urther certif ging memb	☐ Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 11. bereby	d on this repor ability compan	e information supplied with t is true and accurate and y or the receiver or testing	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	contained ect as if n I by Chapi	in Chapter 119, ade under oatt ter 608, Florida	Florida Statutes. I finithat I am a manadatutes.	urther certif ging memb	☐ Change	Addition