

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000044477

FILED
Jan 06, 2006
Secretary of State

Entity Name: SHADE TREE NURSERY, LLC

Current Principal Place of Business:

10791 184TH STREET
MCALPIN, FL 32062

New Principal Place of Business:

Current Mailing Address:

10791 184TH STREET
MCALPIN, FL 32062

New Mailing Address:

FEI Number: 59-3728728

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WHITE, FRANK
10791 184TH STREET
MCALPIN, FL 32062 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: MGR () Delete
Name: WHITE, FRANK
Address: 10791 184TH STREET
City-St-Zip: MCALPIN, FL 32062

Title: MGR () Delete
Name: WHITE, JANE
Address: 10791 184TH STREET
City-St-Zip: MCALPIN, FL 32062

Title: MGR () Delete
Name: WHITE, TOMMY E
Address: 10791 184TH STREET
City-St-Zip: MCALPIN, FL 32062

Title: MGR () Delete
Name: WHITE, RONALD
Address: 10791 184TH STREET
City-St-Zip: MCALPIN, FL 32062

ADDITIONS/CHANGES:

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

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

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: FRANKLIN WHITE

MGR

01/06/2006

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