

# **2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000058041

**FILED**  
**Apr 17, 2006**  
**Secretary of State**

**Entity Name:** FUGATE'S PLANTS AND LANDSCAPING, LLC

**Current Principal Place of Business:**

10539 SW HIGHWAY 17  
FORT OGDEN, FL 34267

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 9  
FORT OGDEN, FL 34267

**New Mailing Address:**

PO BOX 282  
FORT OGDEN, FL 34267

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

MIDDLEBROOKS, J HUGH  
200 SOUTH ORANGE AVENUE  
SARASOTA, FL 34236 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: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MG ( ) Change (X) Addition  
Name: FUGATE, DEBORAH E  
Address: P.O. BOX 282  
City-St-Zip: FORT OGDEN, FL 34267

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:** DEBORAH E FUGATE

MG

04/17/2006

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