

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000016701

FILED
Apr 20, 2008
Secretary of State

Entity Name: FLORIDA GREENSCAPES, LLC

Current Principal Place of Business:

4309 W GRANADA STREET
TAMPA, FL 33629

New Principal Place of Business:

Current Mailing Address:

PO BOX 18936
TAMPA, FL 33679

New Mailing Address:

FEI Number: 20-5141066

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FAUST, MICHAEL D
4309 W GRANADA STREET
TAMPA, FL 33679 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: MGRM () Delete
Name: FAUST, MICHAEL D
Address: 4309 W GRANADA STREET
City-St-Zip: TAMPA, FL 33679

Title: MGR () Delete
Name: FAUST, JOHN
Address: 4309 WEST GRANADA ST
City-St-Zip: TAMPA, FL 33629

Title: MGR (X) Delete
Name: ADAMS, DEREK
Address: 4309 WEST GRANDA ST
City-St-Zip: TAMPA, FL 33629

ADDITIONS/CHANGES:

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

Title: MGR (X) Change () Addition
Name: KING, RUSSELL L
Address: 4309 WEST GRANADA ST
City-St-Zip: TAMPA, FL 33629

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

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: MICHAEL D FAUST

MGRM

04/20/2008

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