

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000028526

FILED
Apr 27, 2007
Secretary of State

Entity Name: EBC NURSERY AND LANDSCAPING, LLC

Current Principal Place of Business:

15100 COLLIER BLVD.
NAPLES, FL 34119

New Principal Place of Business:

27599 RIVERVIEW CENTER BLVD
#205
BONITA SPRINGS, FL 34134

Current Mailing Address:

15100 COLLIER BLVD.
NAPLES, FL 34119

New Mailing Address:

27599 RIVERVIEW CENTER BLVD
#205
BONITA SPRINGS, FL 34134

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HALL, DAVID W
15100 COLLIER BLVD.
NAPLES, FL 34119 US

Name and Address of New Registered Agent:

YITZHAK, RAHAMIM
4206 ENTERPRISE AVENUE
#205
NAPLES, FL 34104 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: RAMI YITZHAK

04/27/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: HALL, DAVID W
Address: 15100 COLLIER BLVD.
City-St-Zip: NAPLES, FL 34119

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

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

ADDITIONS/CHANGES:

Title: MPTS (X) Change () Addition
Name: ELIAS, OVADIA R
Address: 27599 RIVERVIEW CENTER BLVD #205
City-St-Zip: BONITA SPRINGS, FL 34134

Title: V () Change (X) Addition
Name: YITZHAK, RAMI
Address: 27599 RIVERVIEW CENTER BLVD #205
City-St-Zip: BONITA SPRINGS, FL 34134 US

Title: V () Change (X) Addition
Name: ALIAS, ILAN
Address: 27599 RIVERVIEW CENTER BLVD #205
City-St-Zip: BONITA SPRINGS, FL 34134

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: OVADIA R ELIAS

MPTS

04/27/2007

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