

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000051945

FILED  
Feb 01, 2008  
Secretary of State

Entity Name: CROWN OF THORNS NURSERY, LLC

## Current Principal Place of Business:

13754 MARSEILLES CT  
CLEARWATER, FL 33762

## New Principal Place of Business:

1022 WYNDHAM WAY  
SAFETY HARBOR, FL 34695

## Current Mailing Address:

13754 MARSEILLES CT  
CLEARWATER, FL 33762

## New Mailing Address:

1022 WYNDHAM WAY  
SAFETY HARBOR, FL 34695

FEI Number: 20-4972065

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

HURLEY, SHELLY DAWN  
13754 MARSEILLES CT  
CLEARWATER, FL 33762 US

## Name and Address of New Registered Agent:

HURLEY, SHELLY DAWN  
1022 WYNDHAM WAY  
SAFETY HARBOR, FL 34695 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: SHELLY HURLEY

02/01/2008

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: HURLEY, ALTON KEITH  
Address: 13754 MARSEILLES CT  
City-St-Zip: CLEARWATER, FL 33762

Title: MGRM ( ) Delete  
Name: HURLEY, SHELLY D  
Address: 13754 MARSEILLES CT  
City-St-Zip: CLEARWATER, FL 33762

Title: MGRM ( ) Delete  
Name: HURLEY, ANDREW J  
Address: 13754 MARSEILLES CT  
City-St-Zip: CLEARWATER, FL 33762

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: HURLEY, ALTON KEITH  
Address: 1022 WYNDHAM WAY  
City-St-Zip: SAFETY HARBOR, FL 34695

Title: MGRM (X) Change ( ) Addition  
Name: HURLEY, SHELLY D  
Address: 1022 WYNDHAM WAY  
City-St-Zip: SAFETY HARBOR, FL 34695

Title: MGRM (X) Change ( ) Addition  
Name: HURLEY, ANDREW J  
Address: 1022 WYNDHAM WAY  
City-St-Zip: SAFETY HARBOR, FL 34695

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: SHELLY HURLEY

VP

02/01/2008

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