2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Sep 22, 2008
Secretary of State

DOCUMENT# L06000064375

Entity Name: ESPECIALLY ROSES LLC

Current Principal Place of Business:

1516 E. COLONIAL DR. SUITE 110
ORLANDO, FL 32803

New Principal Place of Business:

4440 PGA BLVD.
SUITE 410
PALM BEACH GARDENS, FL 33410

Current Mailing Address:

1516 E. COLONIAL DR. SUITE 110
ORLANDO, FL 32803

New Mailing Address:

13 HUNTLY DRIVE
PALM BEACH GARDENS, FL 33418

FEI Number: 59-2439524 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

WAKEFIELD, MARCIA L
13 HUNTLY DRIVE
PALM BEACH GARDENS, FL 33418 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: WAKEFIELD, MARCIA L
Address: 13 HUNTLY DRIVE
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: MGR ( ) Delete
Name: WAKEFIELD, DEXTER B
Address: 4400 PGA BLVD., STE. 410
City-St-Zip: PALM BEACH GARDENS, FL 33410

ADDITIONS/CHANGES:

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 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: MARCIA WAKEFIELD MGR 09/22/2008

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