2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000066428

Entity Name: MAH HORTICULTURAL SERVICES, LLC

Apr 14, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

8466 NORTH LOCKWOOD RIDGE RD 255

SARASOTA, FL 34243

New Mailing Address: Current Mailing Address:

8466 NORTH LOCKWOOD RIDGE RD SARASOTA, FL 34243

FEI Number: 20-5140129 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

HANENIAN, KEITH M HERMAN, MARK A 64 SARASÓTA CENTER BLVD 8466 N. LOCKWOOD RIDGE RD SARASOTA, FL 34240 SARASOTA, FL 34243 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: MARK A HERMAN 04/14/2009

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

PRES Title: () Delete (X) Change () Addition

HERMAN, MARK A MGRM HERMAN, MARK Name: Name:

Address: 8466 NORTH LOCKWOOD RIDGE RD, #255 Address: 8466 NORTH LOCKWOOD RIDGE RD, #255 SARASOTA, FL 34243 SARASOTA, FL 34243

City-St-Zip: City-St-Zip:

Title: Title: MGRM () Change (X) Addition () Delete Name: Name: MULLEN, GRANT S MGRM Address: Address: 7461 PALMER GLEN CIRCLE City-St-Zip: City-St-Zip: SARASOTA,, FL 34240

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: MARK A HERMAN **MGRM** 04/14/2009