

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

DOCUMENT # L06000104832

1. Entity Name
HG GREENWOOD LAND, L.C.



Principal Place of Business
13080 MARSH LANDING
PALM BEACH GARDENS, FL 33418

Mailing Address
6231 PGA BOULEVARD
SUITE 104-#393
PALM BEACH GARDENS, FL 33418

FILED
Apr 23, 2008 08:00 AM
Secretary of State



02182008 No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-5783609

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

GIMELSTOB, HERBERT
13080 MARSH LANDING
PALM BEACH GARDENS, FL 33418

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE _____

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

U000000915378
05/09/08-80012-025 138.75

9. MANAGING MEMBERS/MANAGERS

TITLE MGR
NAME GIMELSTOB, HERBERT
STREET ADDRESS 13080 MARSH LANDING
CITY-ST-ZIP PALM BEACH GARDENS, FL 33418

TITLE MGR
NAME EPSTEIN, WILLIAM L
STREET ADDRESS 2300 GLADES ROAD, SUITE 400 EAST
CITY-ST-ZIP BOCA RATON, FL 33431

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

4/13-08 561-7891002