

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000035262

Entity Name: E & C NURSERY, LLC

FILED  
Feb 11, 2009  
Secretary of State

**Current Principal Place of Business:**

4700 SW 78TH AVE.  
DAVIE, FL 33328

**New Principal Place of Business:**

**Current Mailing Address:**

4700 SW 78TH AVE.  
DAVIE, FL 33328

**New Mailing Address:**

FEI Number: 06-1817385

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MORALES, EDWIN  
510 NE 195TH ST N  
MIAMI, FL 33179 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: MORALES, EDWIN  
Address: 510 NE 195 ST. N.  
City-St-Zip: MIAMI, FL 33179

Title: MGR ( ) Delete  
Name: HERNANDEZ, CARLOS  
Address: 19531 NE 21 CT.  
City-St-Zip: MIAMI, FL 33179

**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: EDWIN MORALES

MGR

02/11/2009

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