

# **2010 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L07000088083

**FILED**  
**Aug 03, 2010**  
**Secretary of State**

**Entity Name:** HOLLY'S NURSERY, LLC

**Current Principal Place of Business:**

180 PINE ISLAND ROAD  
ST. AUGUSTINE, FL 32095 US

**New Principal Place of Business:**

**Current Mailing Address:**

1518 CEDAR GROVE TERRACE  
ORANGE PARK, FL 32003 US

**New Mailing Address:**

**FEI Number:** 26-0798570

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MANTOR, MELINDA L  
698 TARA FARMS DR.  
MIDDLEBURG, FL 32068 US

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

ALBERS, HOLLY A  
1518 CEDAR GROVE TERRACE  
ORANGE PARK, FL 32003 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: HOLLY A. ALBERS

08/03/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: ALBERS, HOLLY A  
Address: 1518 CEDAR GROVE TERRACE  
City-St-Zip: ORANGE PARK, FL 32003 US

I hereby 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: HOLLY A. ALBERS

MGRM

08/03/2010

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