

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000087717

**FILED**  
**Apr 14, 2010**  
**Secretary of State**

**Entity Name:** FLORIDA NATIVE PLANT NETWORK, LIMITED LIABILITY COMPANY

**Current Principal Place of Business:**

2600 SOUTH DOUGLAS RD SUITE 200-A  
CORAL GABLES, FL 33134

**New Principal Place of Business:**

20816 CR 137  
LAKE CITY, FL 32024

**Current Mailing Address:**

2600 SOUTH DOUGLAS RD SUITE 200-A  
CORAL GABLES, FL 33134

**New Mailing Address:**

20816 CR 137  
LAKE CITY, FL 32024

**FEI Number:** 26-3439910

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SHERRER, CHARLES  
2600 SOUTH DOUGLAS RD SUITE 200-A  
CORAL GABLES, FL 33134 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:** MGRM  
**Name:** VILLAZON, GERALD  
**Address:** 20816 CR 137  
**City-St-Zip:** LAKE CITY, FL 32024

**Title:** MGRM  
**Name:** SHERRER, CHARLES  
**Address:** 2600 SOUTH DOUGLAS RD SUITE 200-A  
**City-St-Zip:** CORAL GABLES, FL 33134

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:** GERALD VILLAZON

MGRM

04/14/2010

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