

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L98000002325

Entity Name: BERNSSEN NURSERIES, LLC

FILED
Apr 25, 2005
Secretary of State

Current Principal Place of Business:

3200 TAMIAMI TRAIL NORTH, STE. 200
NAPLES, FL 34103

New Principal Place of Business:

Current Mailing Address:

3200 TAMIAMI TRAIL NORTH, STE. 200
NAPLES, FL 34103

New Mailing Address:

FEI Number: 65-0900319

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LADEMAN, CARRIE E
3200 TAMIAMI TRAIL NORTH
NAPLES, FL 34103 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/MEMBERS:

Title: MGRM () Delete
Name: BERNSSEN, MICHAEL
Address: 6370 HUNTERS ROAD
City-St-Zip: NAPLES, FL 34109

Title: MGRM () Delete
Name: BERNSSEN, KATE
Address: 6370 HUNTERS ROAD
City-St-Zip: NAPLES, FL 34109

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 for the exemption stated in Section 119.07(3)(i), 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: MICHAEL BERNSSEN

MGRM

04/25/2005

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