## 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L99000005652

Entity Name: SOUTHLAND LANDSCAPE SUPPLY - ATLANTA, LLC

FILED Apr 01, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

C/O CAVCO OF NORTH FLORIDA, INC. 9995 GATE PARKWAY NORTH, SUITE 200 JACKSONVILLE, FL 32246

Current Mailing Address: New Mailing Address:

C/O CAVCO OF NORTH FLORIDA, INC. 9995 GATE PARKWAY NORTH, SUITE 200 JACKSONVILLE, FL 32246

FEI Number: 59-3598399 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

APPLEBY, CHARLES C 9995 GATE PARKWAY NORTH SUITE 200 JACKSONVILLE, FL 32246 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:

Electronic Signature of Registered Agent Date

## MANAGING MEMBERS/MEMBERS:

## **ADDITIONS/CHANGES:**

itle: MGRM ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 SOUTHLAND FOREST PRO, DUCTS, LLC
 Name:

 Address:
 9995 GATE PARKWAY NORTH, STE 200
 Address:

 City-St-Zip:
 JACKSONVILLE, FL 32246
 City-St-Zip:

Title: MGRM (X) Delete Title: ( ) Change ( ) Addition

 Name:
 REED, JEFF
 Name:

 Address:
 9995 GATE PARKWAY NORTH, STE 200
 Address:

 City-St-Zip:
 JACKSONVILLE, FL 32246
 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: CHARLES C. APPLEBY MGR 04/01/2004