


**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 06, 2007 08:00 AM
Secretary of State

DOCUMENT # M04000000356 1. Entity Name HIBISCUS FLORIDA PROPERTIES, LLC	
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Principal Place of Business 1 HIBISCUS AVENUE MOUNT DORA, FL 32757	Mailing Address 1042 WILLOW CREEK ROAD SUITE A-101, PMB 514 PRESCOTT, AZ 86301
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01312007 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-0633669	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent TROIANO, VICTOR J 317 S. TENNESSEE AVE. LAKELAND, FL 33801

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

**Filing Fee is \$50.00
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR STEWART, KAREN S TRUSTEE 1042 WILLOW CREEK RD, SUITE A-101 #514 PRESCOTT, AZ 86301
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:  **2 March 2007**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #