

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000003922

Entity Name: CONSOLIDATED NURSERIES, LLC

Current Principal Place of Business:

3300 HENDERSON BLVD., STE. 105
TAMPA, FL 33609

Current Mailing Address:

3300 HENDERSON BLVD., STE. 105
TAMPA, FL 33609

FEI Number: 26-4042321

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JACOBSON, TODD
3300 HENDERSON BLVD., STE. 105
TAMPA, FL 33609 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: TODD JACOBSON

03/03/2014

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title PRES
Name JACOBSON, TODD
Address 3300 HENDERSON BLVD., SUITE 105
City-State-Zip: TAMPA FL 33609

I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: TODD JACOBSON

PRESIDENT

03/03/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date