

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000200868

**Entity Name:** BOYCE NURSERY, LLC

**Current Principal Place of Business:**

6210 CANARY STREET  
SARASOTA, FL 34241

**Current Mailing Address:**

6210 CANARY STREET  
SARASOTA, FL 34241 US

**FEI Number:** 82-2945307

**Certificate of Status Desired:** No

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

GOLDSMITH, STANLEY A  
2937 BEE RIDGE ROAD  
SUITE 9  
SARASOTA, FL 34239 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

**Authorized Person(s) Detail :**

Title MGR  
Name BOYCE, LOURDES C  
Address 6210 CANARY STREET  
City-State-Zip: SARASOTA FL 34241

Title MGR  
Name BOYCE, GERALD  
Address 6210 CANARY STREET  
City-State-Zip: SARASOTA FL 34241

Title P,T  
Name BOYCE, LOURDES C  
Address 6210 CANARY STREET  
City-State-Zip: SARASOTA FL 34241

Title SEC  
Name BOYCE, LOURDES C  
Address 6210 CANARY STREET  
City-State-Zip: SARASOTA FL 34241

Title VP,T  
Name BOYCE, GERALD  
Address 6210 CANARY STREET  
City-State-Zip: SARASOTA FL 34241

Title SEC  
Name BOYCE, GERALD  
Address 6210 CANARY STREET  
City-State-Zip: SARASOTA FL 34241

*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:** LOURDES C. BOYCE (SAG)

**PRESIDENT**

**06/28/2018**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date