


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 17, 2006 08:00 AM
Secretary of State

DOCUMENT # L02000033859

1. Entity Name
G & F FARMS, LLC



Principal Place of Business
**2630 SYDNEY-DOVER ROAD
 DOVER, FL 33527**

Mailing Address
**POST OFFICE BOX 279
 DOVER, FL 33527-0279**

DO NOT WRITE IN THIS SPACE



02272006 No Chg-LLC CR2E083 (11/05)

4. FEI Number
11-3668152 Applied For
 Not Applicable

5. Certificate of Status Desired **\$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

**EVANS, STEPHEN L
 104 NORTH THOMAS STREET
 PLANT CITY, FL 33563**

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 _____

**Filing Fee is \$50.00
 Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM WILLIAMSON, GLENN 2630 SYDNEY-DOVER ROAD DOVER, FL 33527
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM WILLIAMSON, FRANCES 2630 SYDNEY-DOVER ROAD DOVER, FL 33527
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 05/01/06-80036-012 50.00

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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: Glenn Williamson 4/12/06 813-659-0400

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #