## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M05000005267

Entity Name: CLEAR SPRINGS FARMING, LLC

FILED Mar 20, 2009 Secretary of State

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

690 E. DAVIDSON ST.

BARTOW, FL 33830 US

6105 SPIRIT LAKE ROAD
WINTER HAVEN, FL 33880 US

Current Mailing Address: New Mailing Address:

690 E. DAVIDSON ST. P.O. BOX 1070

BARTOW, FL 33830 US BARTOW, FL 33831 US

FEI Number: 16-1730270 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:

C T CORPORATION SYSTEM

1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

ATCHLEY, TERRY W
6105 SPIRIT LAKE ROAD
WINTER HAVEN, FL 33880 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: TERRY ATCHLEY 03/20/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGR () Delete Title: () Change () Addition

 Name:
 PHELPS, STANFORD N
 Name:

 Address:
 8 SOUND SHORE DR., SUITE 285
 Address:

 City-St-Zip:
 GREENWICH, CT 06830 US
 City-St-Zip:

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

 Name:
 NVESTORS LIFE INSURA, NCE CORPORATIO N
 Name:

 Address:
 TOWN CENTER MALL, PROVIDENCIALES
 Address:

 City-St-Zip:
 TURKS AND CAICOS ISLANDS, TC
 TC
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: STANFORD N PHELPS MGR 03/20/2009