## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000110475

Entity Name: GENESIS FARMS, LLC

FILED Jan 05, 2008 Secretary of State

**Current Principal Place of Business:** 

**New Principal Place of Business:** 

13833 WELLINGTON TRACE, E-4

11740 ST. ANDREW'S PLACE, APT. 204 WELLINGTON, FL 334147077

**Current Mailing Address:** 

**New Mailing Address:** 

P.O. BOX 13833, WELLINGTON TRACE E-4 PMB 415

PMB 415

WELLINGTON, FL 33414

WELLINGTON, FL 33414 FEI Number: 20-5941601

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

OLIYMYK, DAVID M

11740 ST. ANDREW'S PLACE, APT. 204 WELLINGTON, FL 334147077 US

OLIYNYK, DAVID M 11740 ST. ANDREW'S PLACE, APT. 204

WELLINGTON, FL 33414

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: DAVID M. OLIYNYK

01/05/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

MGRM () Delete

OILYNYK, DAVID M Name:

Address: 11740 ST. ANDREW'S PLACE, APT. 204

City-St-Zip: WELLINGTON, FL 334147077 ADDITIONS/CHANGES:

Address:

(X) Change ( ) Addition

Title: OILYNYK, DAVID M Name:

11740 ST. ANDREW'S PLACE, APT. 204

City-St-Zip: WELLINGTON, FL 33414

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.

**MGRM** SIGNATURE: DAVID M. OLIYNYK 01/05/2008