

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000081935

Entity Name: WHALEY FARMS, LLC

Current Principal Place of Business:

2 POST ROAD WEST
WESTPORT, CT 06880

Current Mailing Address:

2 POST ROAD WEST
WESTPORT, CT 06880 US

FEI Number: 20-3327051

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KRONENGOLD, JEFFREY LESQUIRE
825 CORAL RIDGE DRIVE
CORAL SPRINGS, FL 33071 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 MANAGER
Name MARCUS , BARRY P
Address 2 POST ROAD WEST
City-State-Zip: WESTPORT CT 06880

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: BARRY P MARCUS

MANAGER

04/05/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date