

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000116480

**Entity Name:** IDLEWILD FARM AND AQUATICS, LLC

**Current Principal Place of Business:**

13501 S SHORE BLVD  
STE 102  
WELLINGTON, FL 33467

**Current Mailing Address:**

13501 S SHORE BLVD  
STE 102  
WELLINGTON, FL 33467 US

**FEI Number:** 33-1190914

**Certificate of Status Desired:** No

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

GRIMES, JOHN  
13501 S SHORE BLVD  
STE 102  
WELLINGTON, FL 33467 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 MGRM  
Name IDLEWILD STABLES, INC  
Address 13501 SOUTH SHORE BLVD. STE 102  
City-State-Zip: WELLINGTON FL 33414

*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:** JOHN GRIMES

**MANAGER**

**03/19/2014**

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

\_\_\_\_\_  
Date