

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000122830

**Entity Name:** FOLDS FARMS, LLC

**Current Principal Place of Business:**

13846 ATLANTIC BLVD.  
#1018  
JACKSONVILLE, FL 32225-3289

**Current Mailing Address:**

13846 ATLANTIC BLVD.  
#1018  
JACKSONVILLE, FL 32225-3289 US

**FEI Number:** 26-1556283

**Certificate of Status Desired:** No

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

DOOLITTLE, GUERRY B  
13846 ATLANTIC BLVD.#1018  
JACKSONVILLE, FL 32225 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	MR	Title	MRS.
Name	DOOLITTLE, GUERRY B	Name	NANCY C DEEHAN LIVING TRUST
Address	13846 ATLANTIC BOULEVARD, #1018	Address	2637 LE SABRE PLACE
City-State-Zip:	JACKSONVILLE FL 32225-3289	City-State-Zip:	AMELIA ISLAND FL 32034-8977

*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:** NANCY C DEEHAN

**PARTNER**

**04/10/2014**

Electronic Signature of Signing Authorized Person(s) Detail

Date