

2017 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M05000005267

Entity Name: CLEAR SPRINGS FARMING, LLC**Current Principal Place of Business:**6105 SPIRIT LAKE ROAD
WINTER HAVEN, FL 33880**Current Mailing Address:**P.O. BOX 1070
BARTOW, FL 33831 US**FEI Number:** 16-1730270**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**POMEROY, AMY
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:**_____
Electronic Signature of Registered Agent_____
Date**Authorized Person(s) Detail :**

Title MGR, CHAIRMAN
Name PHELPS, STANFORD N
Address 2001 W MAIN STREET
SUITE 235
City-State-Zip: STAMFORD CT 06902

Title VP
Name WILKINS, JERE
Address PO BOX 143269
City-State-Zip: FAYETTEVILLE GA 30214

Title VP OF FINANCE
Name POMEROY, AMY B
Address 6105 SPIRIT LAKE ROAD
City-State-Zip: WINTER HAVEN FL 33880

Title SECRETARY, TREASURER
Name ACCURSO, JEAN M
Address 2001 W. MAIN STREET
SUITE 235
City-State-Zip: STAMFORD CT 06902

Title PRESIDENT
Name BOLING, FRED
Address 6105 SPIRIT LAKE ROAD
City-State-Zip: WINTER HAVEN FL 33880

Title VP
Name CONNER, DOUGLAS B
Address 6105 SPIRIT LAKE ROAD
City-State-Zip: WINTER HAVEN FL 33880

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: AMY POMEROY

VP OF FINANCE

04/06/2017

Electronic Signature of Signing Authorized Person(s) Detail_____
Date