

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 13, 2006 08:00 AM
Secretary of State

DOCUMENT # L00000008666

1. Entity Name
SANDY HILL FARM, LLC



Principal Place of Business

S/R 207 NEAR
HASTINGS, FL

Mailing Address

4309 BLUE HERON DRIVE
PONTE VEDRA BEACH, FL 32082



01112006No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3659049

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

PATTERSON, LAWRENCE ESQ.
PATTERSON, BOND & LATSHAW, P.A.
3010 S. THIRD STREET
JACKSONVILLE BEACH, FL 32250

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00
Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS

TITLE MGRM
NAME TIBBETTS, FRED W
STREET ADDRESS 4309 BLUE HERON DRIVE
CITY - ST - ZIP PONTE VEDRA BEACH, FL 32082

TITLE MGRM
NAME TIBBETTS, TYLER D
STREET ADDRESS 2636 SENECA DRIVE
CITY - ST - ZIP JACKSONVILLE, FL 32259

TITLE MGRM
NAME TIBBETTS, ERIC W
STREET ADDRESS 1415 SILVERTHORN DRIVE
CITY - ST - ZIP QUINCY, IL 62305

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

1000000785727
01/18/06-80027-019 50.00

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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.

SIGNATURE:

Fred W. Tibbetts

1-10-06

904-273-6525

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #