


**2008 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Mar 05, 2008 08:00 A**  
**Secretary of State**

<b>DOCUMENT # L00000009101</b> 1. Entity Name HENSON FAMILY FARMS, LLC	
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Principal Place of Business 5315 EIGHTH ST ZEPHYRHILLS, FL 33542-4312	Mailing Address 5315 EIGHTH ST ZEPHYRHILLS, FL 33542-4312
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**DO NOT WRITE IN THIS SPACE**

03012008 No Chg-LLC CR2E083 (12/07)

4. FEI Number 59-3666932	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent

HENSON, JOHN E  
5315 EIGHTH ST  
ZEPHYRHILLS, FL 33542-4312

**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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$138.75**  
**After May 1, 2008 Fee will be \$538.75**

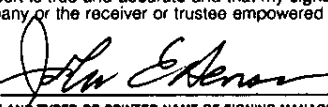
9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HENSON, JOHN E 5315 EIGHTH ST ZEPHYRHILLS, FL 335424312
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HENSON, STEVEN J 2620 MOON ROAD LOGANVILLE, GA 30052
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HILLIARD, PATRICIA 818 SHADWELL STREET FLORA, IL 62839
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HAUSCH, SUZANNE 1232 LEEDS LANE ELK GROVE VILLAGE, IL 60007
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SUZANNE M. MILLER 2921 WAUSSUM TRAIL CHULUOTA, FL 32766
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U000000848444  
03/20/08-80017-017 138.75

**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:  John E. HENSON MGRM 3/1/08 813-782-0580

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #