FILED
Mar 31, 2004 08:00 AM
Secretary of State

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L00000010852

1. Entity Name
CIRCLE Y GROVES HARVESTIN G, LLC

Principal Place of Business	Mailing Address
3825 CANOE CREEK ROAD ST. CLOUD, FL 34772	3825 CANOE CREEK ROAD ST. CLOUD, FL 34772

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03162004 No Chg-LLC CR2E083 (10/03)

4. FEI Number
NOT APPLICABLE
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

SHUFFIELD, W. CHARLES ESQ.
315 E. ROBINSON ST., SUITE 800
ORLANDO, FL 32801

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature is required when reinstating)

Filing Fee is $50.00
Due by May 1, 2004

000080044842
03/31/04-80022-015 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE	P
NAME	YATES, HENRY C
STREET ADDRESS	3825 CANOE CREEK RD.
CITY-ST-ZIP	ST. CLOUD, FL 34772
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
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TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: Henry Yates 3.29.04
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNEE MANAGING MEMBER OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #