

**2005 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Jan 13, 2005 8:00 am**  
**Secretary of State**

01-13-2005 90015 017 \*\*\*\*\*50.00

**DOCUMENT # L00000015518**

1. Entity Name  
**DEAN & DEAN FARMS, LLC**



**20001720**

Principal Place of Business

**14401 HARBOR DRIVE  
BOKEELIA, FL 33922**

Mailing Address

**P.O. BOX 2198  
PINELAND, FL 33945**

**DO NOT WRITE IN THIS SPACE**

01042005 No Chg-LLC

CR2E083 (10/03)

4. FEI Number  
**65-1062131**

Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

**TRADEMARK PALMS INC.  
14401 HARBOR DRIVE  
BOKEELIA, FL 33922**

**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, 2005**

9. **MANAGING MEMBERS/MANAGERS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR TRADEMARK PALMS INC 14401 HARBOR DRIVE BOKEELIA, FL 33922
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IN THIS SPACE**

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:** \_\_\_\_\_

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

**1/7/05 239-283-1329**

Date

Daytime Phone #