

**LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)**

PAGE 1

DOCUMENT # L01000006178

1. Entry Name

B-III Farms & Properties, LLC



FILED

JAN 29 AM 8:23

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2 North Bishop Street

Suite, Apt. #, etc.

3. Mailing Address

P.O. Box 2568

Suite, Apt. #, etc.

City & State
Cross City, Florida

City & State
Cross City, Florida

4. FEI Number 59-3716864

Applied For
Not Applicable

Zip
32628-2568

Country
USA

Zip
32628-2568

Country
USA

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

DO NOT WRITE IN THIS SPACE

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name T. L. Beckham

Street Address (P.O. Box Number is Not Acceptable)

P.O. Box 2568 (Bishop Street-2N)

City Cross City, Florida

FL

Zip Code
32628-2568

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

T.L. Beckham

Manager/Member

01-27-03

DATE

FEE IS \$50.00

Make Check Payable to Florida Department of State
DUE BY MAY 1

300011786739

02/04/03--01059--030 **100.00

9. MANAGING MEMBERS/MANAGERS

TITLE NAME
T.L. Beckham
STREET ADDRESS
P.O. Box 2568 (Bishop Street-2N)
CITY-ST-ZIP
Cross City, Florida 32628-2568

TITLE NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME
STREET ADDRESS
CITY-ST-ZIP

2002
&
2003 UBR

**DO NOT WRITE
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

T.L. Beckham

Manager/Member

01-27-03

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

Date

Daytime Phone #

CR2E083B (12/02)

L 01000006178

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B-III FARMS & PROPERTIES, LLC
Len Beckham, Manager
Post Office Box 2568
Cross City, Florida 32628-2568

January 27, 2003

Mr. Buck Kohr
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

RE: UBR - 2002 and 2003
#L01000006178

BK

Dear Mr. Kohr:

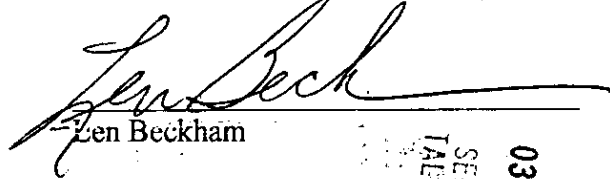
This is to advise that we never received the UBR Form for 2002 and was not aware it was required. Thank you for your assistance with this report.

Enclosed please find the required report and our check #1090 for \$100.00 for the year 2002 and 2003.

Please REACTIVATE this account and note the mailing address is P.O. Box 2568. There is no home delivery in Cross City.

Sincerely,

B-III FARMS & PROPERTIES, LLC


Len Beckham

LB/mhd

Enclosures: Check #1090 for \$100.00
UBR Form

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA