

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L01000008718

**Entity Name:** M.E.D. FARMS IMMOKALEE, LLC

**FILED**  
**Feb 05, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

17637 S. DIXIE HWY  
MIAMI, FL 33157

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 570819  
MIAMI, FL 33257

**New Mailing Address:**

**FEI Number:** 59-2832918

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HAGAN, JOSEPH EDWARD  
17637 S. DIXIE HWY.  
MIAMI, FL 33157 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: HAGAN, JOSEPH E  
Address: 17637 S. DIXIE HWY  
City-St-Zip: MIAMI, FL 33157

Title: MGRM  
Name: HAGAN, DONALD M  
Address: 17637 S. DIXIE HWY  
City-St-Zip: MIAMI, FL 33157

I hereby certify that the information indicated on this report is true and accurate and that my electronic 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: JOSEPH E. HAGAN

MGRM

02/05/2010

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date