

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L02000007033

FILED
Apr 25, 2003
Secretary of State

Entity Name: CROSSWICK FARMS, LLC

Current Principal Place of Business:

2793 C ROAD
LOXAHATCHEE, FL 33470

New Principal Place of Business:

POB 210094
WEST PALM BEACH, FL 33421

Current Mailing Address:

P.O. BOX 210094
WEST PALM BEACH, FL 33421

New Mailing Address:

FEI Number: 65-0687810 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NOCERO, JOSEPPE
2793 C ROAD
LOXAHATCHEE, FL 33470 US

Name and Address of New Registered Agent:

NOCERO, JOSEPPE
POB 210094
WEST PALM BEACH, FL 33421 US

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: JOSEPPE NOCERO

04/25/2003

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: NOCERO, JOSEPPE P
Address: P.O. BOX 210094
City-St-Zip: WEST PALM BEACH, FL 33421

Title: MGR () Delete
Name: NOCERO, DONNA
Address: P.O. BOX 210094
City-St-Zip: WEST PALM BEACH, FL 33421

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JOSEPPE NOCERO

MGR

04/25/2003

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