

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000012008

Entity Name: ALPHA GROWERS, LLC

FILED
Jan 05, 2007
Secretary of State

Current Principal Place of Business:

5615 WO GRIFFIN ROAD
PLANT CITY, FL 33567

New Principal Place of Business:

Current Mailing Address:

PO BOX 128
DURANT, FL 33530

New Mailing Address:

FEI Number: 02-0596393

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PETITJEAN, CYNTHIA M ESQ
1700 S. MACDILL AVENUE, SUITE 200
TAMPA, FL 33629 US

Name and Address of New Registered Agent:

PETITJEAN, CYNTHIA M ESQ
110 W. REYNOLDS ST
PLANT CITY, FL 33566 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:

01/05/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: GLOVER, WAYNE
Address: P.O. BOX 128
City-St-Zip: DURANT, FL 33530

Title: MGRM () Delete
Name: GLOVER, RICHARD S
Address: P.O. BOX 128
City-St-Zip: DURANT, FL 33530

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 Chapter 119, 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: WAYNE GLOVER

MGR

01/05/2007

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