

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 09, 2008 08:00 AM
Secretary of State

DOCUMENT # L02000013643
 1. Entity Name
 EXCALIBUR FRUIT TREES, LLC



Principal Place of Business 5200 FEARNLEY RD LAKE WORTH, FL 33467	Mailing Address 5200 FEARNLEY RD LAKE WORTH, FL 33467
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DO NOT WRITE IN THIS SPACE



01052008 No Chg-LLC CR2E083 (12/07)

4. FEI Number 90-0074425	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

RODGERS, KAREN
 2960 MELALEUCA DR
 WEST PALM BEACH, FL 33406

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

U00000778037
 01/10/08-80032-015 143.75

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MM WILSON, RICHARD 5200 FEARNLEY RD LAKE WORTH, FL 33467
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MM WILSON, LYNDA 5200 FEARNLEY RD LAKE WORTH, FL 33467
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: *Klynon Wilson Lynda Wilson* 1-7-8 561-969-6988
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #