2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 15, 2004
Secretary of State

DOCUMENT# L03000009487

Entity Name: CABIN CREEK FARMS, LLC

Current Principal Place of Business:

1443 FRANK SMITH RD.
QUINCY, FL 32351

New Principal Place of Business:

1443 FRANK SMITH RD.
QUINCY, FL 32352

Current Mailing Address:

1443 FRANK SMITH RD.
QUINCY, FL 32351

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PUGH, NELSON L
2540 NOBLE CT.
TALLAHASSEE, FL 32308 US

Name and Address of New Registered Agent:

MONGIOVI, NELSON L
2540 NOBLE CT.
TALLAHASSEE, FL 32308 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: NELSON MONGIOVI 04/15/2004
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR ( ) Change (X) Addition
Name: MONGIOVI, NELSON L
Address: PO BOX 10872
City-St-Zip: TALLAHASSEE, FL 32302

Title: MGR ( ) Change (X) Addition
Name: RHODES, TERRY
Address: 2540 NOBLE COURT
City-St-Zip: TALLAHASSEE, FL 32308

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: NELSON MONGIOVI MGR 04/15/2004
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date