## 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L03000019495

Entity Name: MALWA GREYHOUND FARMS, LLC

FILED Apr 29, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4430 NW 89TH PLACE OCALA, FL 34482 US

Current Mailing Address: New Mailing Address:

PO BOX 82 PO BOX 82

LOWELL, FL 32663 LOWELL, FL 32663 US

FEI Number: 74-3097689 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

SIDHU, NAVPREET SIDHU, NAVPREET 4430 NW 89TH PLACE P O BOX - 82

OCALA, FL 34482 US OCALA, FL 32663 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.

ADDITIONS/CHANGES:

SIGNATURE: NAVPREET SIDHU 04/29/2004

Electronic Signature of Registered Agent Date

## MANAGING MEMBERS/MEMBERS:

\_\_\_\_

 Title:
 MGR
 ( ) Delete
 Title:
 MGRM
 (X) Change ( ) Addition

 Name:
 SIDHU, NAVPREET
 Name:
 SIDHU, NAVPREET

 Address:
 4430 NW 89TH PLACE
 Address:
 P O BOX - 82

City-St-Zip: OCALA, FL 34482 US City-St-Zip: OCALA, FL 32663 US

Title: MGR () Delete Title: MGRM (X) Change () Addition Name: MANN, AJIT Name: MANN, AJIT Address: P O BOX - 82

Address: 4430 NVV891H PLACE Address: P 0 BOX - 82

City-St-Zip: OCALA, FL 34482 US City-St-Zip: OCALA, FL 32663 US

Title: MGR (X) Delete Title: ( ) Change ( ) Addition Name: SIDHU, BOBBY Name:

 Name
 SIDHO, BOBBY
 Name

 Address:
 P.O. BOX 151058
 Address:

 City-St-Zip:
 ALTAMONTE SPRINGS, FL 327151058 US
 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: NAVPREET SIDHU MGRM 04/29/2004