2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000019990

FILED Jul 01, 2004 Secretary of State

Entity Name: FULL CIRCLE FARM, LLC **Current Principal Place of Business: New Principal Place of Business:** 2705 APPALOOSA TRAIL WELLINGTON, FL 33414 **Current Mailing Address: New Mailing Address:** 2705 APPALOOSA TRAIL WELLINGTON, FL 33414 FEI Number: 41-2101229 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: CORPORATE CREATIONS NETWORK INC. 11380 PROSPERITY FARMS RD. #221E PALM BEACH GARDENS, FL 33410 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: Electronic Signature of Registered Agent Date **MANAGING MEMBERS/MEMBERS: ADDITIONS/CHANGES:** MGR () Delete () Change () Addition LEFFERDINK, JUDITH Name: Name: Address: 2705 APPALOOSA TRAIL Address: City-St-Zip: WELLINGTON, FL 33414 City-St-Zip: Title: MGR () Delete Title: () Change () Addition Name: JENNINGS, DAVID Name: Address: 2705 APPALOOSA TRAIL Address: City-St-Zip: WELLINGTON, FL 33414 City-St-Zip: Title: MGR () Delete Title: () Change () Addition LEFFERDINK, AMY Name: Name: Address: 2705 APPALOOSA TRAIL Address: City-St-Zip: WELLINGTON, FL 33414 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: AMY LEFFERDINK MGR 07/01/2004