2005 LIMITED LIABILITY COMPANY

ANNUAL REPORT

DOCUMENT # L03000032306' 1. Entity Name

NATURE COAST CATTLE, L.L.C.

FILED Apr 20, 2005 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

2109 WEST U.S. HIGHWAY 90, STE. 170 LAKE CITY, FL 32055

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03082005 No Chg-LLC

CR2E083 (10/03)

4. FEI Number 20-0255620

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

BRYANT, DREXAL DALE 2109 WEST U.S. HIGHWAY 90, STE. 170 LAKE CITY, FL 32055

DO NOT WRITE IN THIS SPACE

8.	. The above named entity submits this statement for the purpose of changing its registered or	ffice of re	egistered ager	nt, or both,	in the Sta	ite of Flori	da.	am familiar with, and accept
	the obligations of registered agent.							

SIGNATURE.

Signature, typed or printed name of registered agent and title if applicable

(NOTE Registered Agent signature required when reinstating)

Filing Fee is \$50.00 Due by May 1, 2005

9.	MANAGING MEMBERS/MANAGERS
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR VERMEIRE, DREW A PH.D 21 NORMANDY DRIVE LAKE ST. LQUIS, MO 63367
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	partifu that the information supplied with this filling class not quality for the exemp

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DO NOT WRITE IN THIS SPACE

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 179.07(3)(i), Flörida 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: 1

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE