

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000034082

**FILED**  
**Mar 14, 2011**  
**Secretary of State**

**Entity Name:** R&M FARMS, LIMITED LIABILITY COMPANY

**Current Principal Place of Business:**

2068 RICHARDS RD.  
NAPLES, FL 34120

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 8539  
NAPLES, FL 34101

**New Mailing Address:**

**FEI Number:** 35-2236671

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DORIA, REYNALDO  
3145 58TH STREET S.W.  
NAPLES, FL 34116 US

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

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/MANAGERS:**

Title: MGRM  
Name: DORIA, REYNALDO  
Address: P.O. BOX 8539  
City-St-Zip: NAPLES, FL 34119

Title: MGRM  
Name: DORIA, M. J  
Address: P.O. BOX 8539  
City-St-Zip: NAPLES, FL 34119

I hereby 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: REYNALDO DORIA

MGM

03/14/2011

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date