


**2006 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**May 01, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L03000035239</b> 1. Entity Name <b>DAHL FARMS, LLC</b>	
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Principal Place of Business <b>6000 NW 70TH AVE OCALA, FL 34482 US</b>	Mailing Address <b>6000 NW 70TH AVE OCALA, FL 34482 US</b>
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04132006 No Chg-LLC CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>02-0710206</b>	Applied for <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00 Additional Fee Required</b>

6. Name and Address of Current Registered Agent  <b>DAHL, ROBERT S SR. 6000 NW 70TH AVE OCALA, FL 34482</b>
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<b>DO NOT WRITE IN THIS SPACE</b>
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8. 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. I 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's signature required when renewing) DATE

**Filing Fee is \$50.00  
Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGRM DAHL, ROBERT S., SR., TRUSTEE 6000 NW 70TH AVE OCALA, FL 34482</b>
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05/13/06-80045-007 50.00

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida 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:** *Robert S. Dahl* **4-14-06 352-840-9752**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone If