

**-2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

DOCUMENT # L03000040023

1. Entity Name
COUNTRY CARE FARMS, LLC



Principal Place of Business
511 EAST BLOOMINGDALE AVENUE
BRANDON, FL 33511

Mailing Address
511 EAST BLOOMINGDALE AVENUE
BRANDON, FL 33511

FILED
Feb 05, 2007 08:00 AM
Secretary of State



01152007 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number

56-2407484

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

LASMAN, JEFFREY M ESQ.
C/O LASMAN & ASSOCIATES, P.A.
115 PROVIDENCE ROAD
BRANDON, FL 33511

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IN THIS SPACE**

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 signature required when reinstating)

DATE

**Filing Fee is \$50.00
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS

TITLE MGRM
NAME KANE, RICHARD Z
STREET ADDRESS 511 EAST BLOOMINGDALE AVENUE
CITY-ST-ZIP BRANDON, FL 33511

TITLE MGRM
NAME KANE, CHERYL A
STREET ADDRESS 511 EAST BLOOMINGDALE AVENUE
CITY-ST-ZIP BRANDON, FL 33511

TITLE MGRM
NAME KUEBELBECK, K. LEANN
STREET ADDRESS 511 EAST BLOOMINGDALE AVENUE
CITY-ST-ZIP BRANDON, FL 33511

TITLE MGRM
NAME MORGAN, CHRISTY L
STREET ADDRESS 511 EAST BLOOMINGDALE AVENUE
CITY-ST-ZIP BRANDON, FL 33511

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

U00000621510
02/12/07-80019-023 50.00

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IN THIS SPACE**

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:

Richard Kane 1-31-07