## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L03000040023

Entity Name: COUNTRY CARE FARMS, LLC

FILED Feb 05, 2009 Secretary of State

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

Current Mailing Address: New Mailing Address:

511 EAST BLOOMINGDALE AVENUE BRANDON, FL 33511

FEI Number: 56-2407484 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:

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

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: ADDITIONS/CHANGES:

Title: MGRM ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 KANE, RICHARD Z
 Name:

 Address:
 511 EAST BLOOMINGDALE AVENUE
 Address:

 City-St-Zip:
 BRANDON, FL 33511
 City-St-Zip:

Title: MGRM ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 KANE, CHERYL A
 Name:

 Address:
 511 EAST BLOOMINGDALE AVENUE
 Address:

 City-St-Zip:
 BRANDON, FL 33511
 City-St-Zip:

Title: MGRM ( ) Delete Title: ( ) Change ( ) Addition Name: KUEBELBECK, K. LEANN Name:

 Name:
 KUEBELBECK, K. LEANN
 Name:

 Address:
 511 EAST BLOOMINGDALE AVENUE
 Address:

 City-St-Zip:
 BRANDON, FL 33511
 City-St-Zip:

Title: MGRM ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 MORGAN, CHRISTY L
 Name:

 Address:
 511 EAST BLOOMINGDALE AVENUE
 Address:

 City-St-Zip:
 BRANDON, FL 33511
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: RICHARD Z KANE MGRM 02/05/2009