

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000012956

Entity Name: SCATTERED ACRES, LLC

FILED  
Apr 26, 2009  
Secretary of State

**Current Principal Place of Business:**

2123 NORTH HIGHWAY 79  
BONIFAY, FL 32425

**New Principal Place of Business:**

**Current Mailing Address:**

2123 NORTH HIGHWAY 79  
BONIFAY, FL 32425

**New Mailing Address:**

FEI Number: 55-0874907

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CURRY, R. RAYE  
50 NORTH LAURA STREET, STE. 2500  
JACKSONVILLE, FL 32202 US

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

CURRY, R. RAYE  
7971 MOUNT RANIER DR.  
JACKSONVILLE, FL 32256 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:

04/26/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: BROOKS, SHERIDAN C  
Address: 2123 NORTH HIGHWAY 79  
City-St-Zip: BONIFAY, FL 32425

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: SHERIDAN C. BROOKS

MGRM

04/26/2009

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