

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000019051

Entity Name: J & R FARMS, L.L.C.

FILED  
Jan 09, 2009  
Secretary of State

**Current Principal Place of Business:**

760 CATHY TRIPP LANE  
JACKSONVILLE, FL 32220

**New Principal Place of Business:**

**Current Mailing Address:**

760 CATHY TRIPP LANE  
JACKSONVILLE, FL 32220

**New Mailing Address:**

FEI Number: 34-1982473

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

TEAGUE, JACK  
760 CATHY TRIPP LANE  
JACKSONVILLE, FL 32220 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 ( ) Delete  
Name: TEAGUE, JACK  
Address: 760 CATHY TRIPP LANE  
City-St-Zip: JACKSONVILLE, FL 32220

Title: MGRM ( ) Delete  
Name: NORMAN, RAY  
Address: 776 IRA HALL ROAD  
City-St-Zip: MOULTRIE, GA 31768

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGRM (X) Change ( ) Addition  
Name: NORMAN, RAY  
Address: 2000 GARRISON AVE  
City-St-Zip: PORT ST JOE, FL 32456

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: JACK P TEAGUE

MGR

01/09/2009

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