

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED
Mar 13, 2006 8:00 am
Secretary of State

03-13-2006 90355 007 ****50.00

DOCUMENT # L04000043316

1. Entity Name

BONNIE HEATH FARM, LLC



Principal Place of Business

7145 NW 125TH ST RD
REDDICK FL 32686-3709

Mailing Address

4450 S.W. COLLEGE ROAD
OCALA FL 34474



2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

7145 NW 125th ST. Rd.

Suite, Apt. #, etc.

1st MOORE

CR2E083 (10/05)

City & State

City & State

REDDICK, FL.

4. FEI Number

34-2000732

Applied For

Not Applicable

Zip

Country

Zip

32686-3709

Country

USA

5. Certificate of Status Desired

☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

HEATH, BONNIE
4450 S.W. COLLEGE ROAD-
OCALA FL 34474

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

7145 NW 125th ST. Rd.

City

REDDICK

FL

Zip Code

32686-3709

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 BONNIE M. HEATH MGR.

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$50.00

Make Check Payable to Florida Department of State.

Due By May 1, 2006

9. MANAGING MEMBERS/MANAGERS

TITLE MGR ☐ Delete
NAME HEATH, BONNIE
STREET ADDRESS 4450 S.W. COLLEGE ROAD
CITY-ST-ZIP Ocala FL 34474

TITLE MGR ☐ Delete
NAME HEATH, KIM
STREET ADDRESS 4450 S.W. COLLEGE ROAD
CITY-ST-ZIP Ocala FL 34474

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

10. ADDITIONS/CHANGES

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 7145 NW 125th ST. Rd.
CITY-ST-ZIP REDDICK, FL. 32686-3709

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 7145 NW 125th ST. Rd.
CITY-ST-ZIP REDDICK, FL. 32686-3709

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

352-591-1014