2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000043801

Entity Name: CITRUS OAKS FARM, LLC

FILED Mar 25, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

12029 HAZEN AVENUE

THONOTOSASSA, FL 335922822

Current Mailing Address: New Mailing Address:

12029 HAZEN AVENUE THONOTOSASSA, FL 335922822

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

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

KHORSANDIAN, SHERIAR
12029 HAZEN AVENUE

KHORSANDIAN, SHERIAR K
12029 HAZEN AVENUE

THONOTOSASSA, FL 335922822 US THONOTOSASSA, FL 335922822 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: SHERIAR KHORSANDIAN 03/25/2008

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGR () Delete Title: () Change () Addition

 Name:
 KHORSANDIAN, SHERIAR
 Name:

 Address:
 12029 HAZEN AVENUE
 Address:

 City-St-Zip:
 THONOTOSASSA, FL 335922822
 City-St-Zip:

Title: MGR () Delete Title: MGR (X) Change () Addition

Name: KHORSANDIAN, JAN Name: KHORSANDIAN, JAN K Address: 12029 HAZEN AVENUE Address: 12029 HAZEN AVENUE

City-St-Zip: THONOTOSASSA, FL 335922822 City-St-Zip: THONOTOSASSA, FL 335922822

Title: MGRC () Delete Title: MGRC (X) Change () Addition

Name: KHORSANDIÁN, LEAH Name: KHORSANDIÁN, LEAH F Address: 12029 HAZEN AVE Address: 12029 HAZEN AVE

 City-St-Zip:
 THONOTOSASSA, FL
 335922822
 City-St-Zip:
 THONOTOSASSA, FL
 335922822

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: SHERIAR KHORSANDIAN MNG 03/25/2008