2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 27, 2005
Secretary of State

DOCUMENT# L04000054967

Entity Name: NATURE'S WAY AQUATIC FARM, LLC

Current Principal Place of Business:

907 GARLAND AVE
NOKOMIS, FL 34275 US

New Principal Place of Business:

4899 SW HWY 72
ARCADIA, FL 34266 US

Current Mailing Address:

907 GARLAND AVE
NOKOMIS, FL 34275 US

New Mailing Address:

FEI Number: 61-1475475 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LEGALZOOM NEVADA,INC.
44 W. FLAGLER ST.
SUITE 675
MIAMI, FL 33130 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/MEMBERS:

Title: MGR ( ) Delete
Name: ROY, GREGORY J
Address: 907 GARLAND AVE
City-St-Zip: NOKOMIS, FL 34275 US

Title: MGR ( ) Delete
Name: GAREY-ROY, DEEANN R
Address: 907 GARLAND AVE
City-St-Zip: NOKOMIS, FL 34275 US

Title: MGR ( ) Delete
Name: HOGARTY, C S
Address: 907 GARLAND AVE
City-St-Zip: NOKOMIS, FL 34275 US

Title: MGR ( ) Delete
Name: HERRIN, TIMOTHY A
Address: 907 GARLAND AVE
City-St-Zip: NOKOMIS, FL 34275 US

Title: MGR ( ) Delete
Name: DENNIS, MARK A
Address: 907 GARLAND AVE
City-St-Zip: NOKOMIS, FL 34275 US

Title: MGR ( ) Delete
Name: DUETSCH, PERRY
Address: 907 GARLAND AVE
City-St-Zip: NOKOMIS, FL 34275 US

ADDITIONS/CHANGES:

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

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: DEEANN R GAREY-ROY MGR 02/27/2005

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