

**2007 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Jan 22, 2007 08:00 AM**  
**Secretary of State**

**DOCUMENT # L04000058836**

1. Entity Name  
**B & W SOD & CATTLE, LLC**



Principal Place of Business <b>7201 SW 196TH TERR.          OKEECHOBEE, FL 34974</b>	Mailing Address <b>7201 SW 196TH TERR.          OKEECHOBEE, FL 34974</b>
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**DO NOT WRITE IN THIS SPACE**



01162007No Chg-LLC CR2E083 (11/05)

4. FEI Number <b>NOT APPLICABLE</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

6. Name and Address of Current Registered Agent

**BRUMLEY, CHARLES W JR  
 7201 SW 196TH TERR  
 OKEECHOBEE, FL 34974**

**DO NOT WRITE IN THIS SPACE**

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$50.00 Due by May 1, 2007**

U00000596039  
 01/23/07-80064-006 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR WISE, FREIDA M 1590 SW 28TH ST. OKEECHOBEE, FL 34974
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR BRUMLEY, CHARLES W JR 7201 SW 196TH TERR OKEECHOBEE, FL 34974
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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: Charles W. Brumley Jr. 1/19/07 863-263-7480  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #