## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## FILED Mar 10, 2006 8:00 am Secretary of State

DOCUMENT # L0400080390  1. Entity Name ROSCOE FARMS, LLC						03-10-2006 9	90130 00	01 ****50	0.00
Principal Plac		Mailing Address		1					
1548 THE GREENS WAY Suite 3		1548 THE GREENS WAY Suite 3							
JACKSONVILLE BEACH, FL 32250		JACKSONVILLE BEACH, FL 32250				14()  6)8() 863() 88() 88()			TT BL KI I I BUL
2. Principal Place of Business		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.		02162006	Chg-LLC	CR2E0	83 (11/05)		
City & State		City & State			4. FEI Number 26-4839				oplied For ot Applicable
Zip Country		Zip	Country		5. Certificate of Status Desired S5.00 Additional Fee Required				
	6. Name and Address of Current	Registered Agent			7. Name and	Address of New Re	_		
MCCUE	DIAMARD R IR			Name					
	EDWARD R JR. GREENS WAY	Street Address (		(P.O. Box Numbe	r is Not Acceptable	)			
JACKSON	IVILLE BEACH, FL 32250							_	
	• ; ;			City			FL	Zip Cod	e
	named entity submits this statement for tions of registered agent.	r the purpose of changing its	registere	ed office or registe	ered agent, or both	, in the State of Flor	rida. I am f	amiliar with,	and accept
SIGNATURE .	Signature, typed or printed name of registered agent	and title if applicable. (NOTE	: Registere	d Agent signature require	d when reinstating)		DATE		<del> </del>
Filing Fee is \$50.00 Due by May 1, 2006					Make check payable to Florida Department of State				
Fi D	iling Fee is \$50.00 ue by May 1, 2006								e
9	ue by May 1, 2006  MANAGING MEMBE		10.				Departme	ent of State	
Dı	ue by May 1, 2006	RS/MANAGERS	10.			Florida	Departme		e Addition
9. TITLE	ue by May 1, 2006  MANAGING MEMBE	☐ Defete	TITLE NAMI STRE			Florida	Departme	ent of State	
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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 MANAGURG MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE