2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L04000086790

1. Entity Name
ABC WAKULLA FARMS, LLC



Principal Place of Business

3908 W. MILLERS BRIDGE ROAD TALLAHASSEE, FL 32312

Mailing Address

3908 W. MILLERS BRIDGE ROAD TALLAHASSEE, FL 32312

FILED Jan 18, 2008 08:00 AM Secretary of State



DO NOT WRITE IN THIS SPACE

01112008No Chg-LLC CR2E083 (12/07)

4.	FEI Number	Ĺ	Applied For
	20-1945538		Not Applicable
5.	Certificate of Status Desired	\$5.00 Fee Re	Additional quired

6. Name and Address of Current Registered Agent

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

PROCTOR, M. JULIAN JR 227 S. CALHOUN STREET TALLAHASSEE, FL 32301 DO NOT WRITE

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.	
-	CONTURE	

(NOTE Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75

9.	9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR COGNETTA, ARMAND B JR 3908 W MILLERS BRIDGE RD TALLAHASSEE, FL 32312	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR COGNETTA, SUZANNE 3905 W MILLERS BRIDGE RD TALLAHASSEE, FL 32312	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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TITLE NAME . STREET ADDRESS CITY-ST-ZIP		

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IN THIS SPACE

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 hability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE

1/17-108

Deutime Phone #