
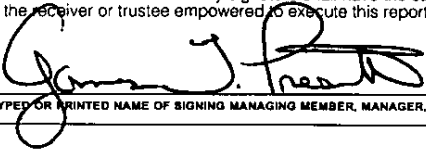


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jun 12, 2006 8:00 am
Secretary of State

06-12-2006 90336 037 ****50.00

DOCUMENT # L05000022042					
1. Entity Name KERRY FOREST, LLC					
Principal Place of Business 602 NORTH MERRIN STREET PLANT CITY, FL 33563			Mailing Address 602 NORTH MERRIN STREET PLANT CITY, FL 33563		
2. Principal Place of Business 3311 Nohlcrest PL		3. Mailing Address 3311 Nohlcrest PL			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State Plant City, FL		City & State Plant City, FL		4. FEI Number 20-4023816	
Zip 33566		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	
Zip 33566		Country USA		Applied For Not Applicable	
6. Name and Address of Current Registered Agent HIGHTOWER, ROBERT S 241 EAST VIRGINIA STREET TALLAHASSEE, FL 32301			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
Filing Fee is \$50.00 Due by September 6, 2006		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR PRESCOTT, JAME H 167 PECK CAWTHON ROAD DEFUNIAK SPRINGS, FL 34235 <input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	James T. Prescott 3311 Nohlcrest PL Plant City, FL 32566 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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: 			Date 6-7-06 Daytime Phone # 813 752 6987		

ATTACHMENT

20047253

#L05000022042

June 7, 2006

Florida Department of State
Division of Corporations
P.O. Box 6478
Tallahassee, FL 32314

Re: Annual Reports

To Whom It May Concern:

Enclosed please find four checks each in the amount of \$50.00 to cover the filing fees for the Division of Corporations 2006 Annual Reports for the following LLC's:

1. Circle P Tree Farm, LLC;
2. James H. Prescott, LLC;
3. Kerry Forest, LLC; and
4. 1219 W. Tharpe, LLC.

Thank you for your assistance with this matter.

Sincerely,



James T. Prescott