

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000028906

Entity Name: RUSSELL FARMS, L.L.C.

FILED
Apr 26, 2006
Secretary of State

Current Principal Place of Business:

5698 KINGERY ROAD
MILTON, FL 32583

New Principal Place of Business:

6799 WASDEN ROAD
JAY, FL 32565

Current Mailing Address:

5698 KINGERY ROAD
MILTON, FL 32583

New Mailing Address:

6799 WASDEN ROAD
JAY, FL 32565

FEI Number: 76-0794203

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RUSSELL, GLENNON
5698 KINGERY ROAD
MILTON, FL 32583 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/MANAGERS:

Title: MGR () Delete
Name: RUSSELL, GLENNON
Address: 5698 KINGERY ROAD
City-St-Zip: MILTON, FL 32583

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: RUSSELL, GLENNON PRES
Address: 5698 KINGERY ROAD
City-St-Zip: MILTON, FL 32583

Title: MGRM () Change (X) Addition
Name: RUSSELL, TOBY VPTREAS
Address: 5804 HERMITAGE CIRCLE
City-St-Zip: MILTON, FL 32570

Title: MGRM () Change (X) Addition
Name: RUSSELL, SHEILA SEC
Address: 5698 KINGERY RD
City-St-Zip: MILTON, FL 32583

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: SHEILA RUSSELL

MGRM

04/26/2006

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