2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000035581

3900 VICKI ROAD

GRACEVILLE, FL 32440

Address:

City-St-Zip:

Entity Name: DAVIS FARMS, LLC

FILED Mar 19, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 3806 OLD HICKORY POND ROAD COTTONDALE, FL 32431 **Current Mailing Address: New Mailing Address:** 3806 OLD HICKORY POND ROAD COTTONDALE, FL 32431 FEI Number: 20-2679535 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BONDURANT, FRANK E 4450 LAFAYETTE STREET MARIANNA, FL 32446 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: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete DAVIS, BENNIE E JR. Name: Name: 3806 OLD HICKORY POND ROAD Address: Address: City-St-Zip: COTTONDALE, FL 32431 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition DAVIS, JOSHUA B Name: Name: Address: 1207 COURT AVENUE Address: City-St-Zip: CHIPLEY, FL 32428 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition DAVIS, ROGER A Name: Name: Address: 3623 HIGHWAY 723 Address: City-St-Zip: GRACEVILLE, FL 32440 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: DAVIS, CHARLES K Name: Address: 3623 HIGHWAY 723 Address: City-St-Zip: GRACEVILLE, FL 32440 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition DAVIS, MICHAEL H Name: Name:

I hereby certify that the information supplied with this filing does not qualify 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.

Address:

City-St-Zip:

SIGNATURE: BENNIE E DAVIS JR MGRM 03/19/2009