

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000036833

FILED
Jan 15, 2009
Secretary of State

Entity Name: SERENOA LLC

Current Principal Place of Business:

225 NEW MARKET ROAD
IMMOKALEE, FL 34142

New Principal Place of Business:

Current Mailing Address:

PO BOX 760
FELDA, FL 33930

New Mailing Address:

FEI Number: 65-1248429

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BIGELEISEN, STANLEY
20280 CALICE COURT
#903
ESTERO, FL 33928 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: MGRM () Delete
Name: SRB TRADING, INC.,
Address: 20280 CALICE COURT , #903
City-St-Zip: ESTERO, FL 33928

Title: MGRM () Delete
Name: NATURAL MEDICINALS,, INC.
Address: 450 CHURCH ROAD
City-St-Zip: FELDA, FL 33930

Title: MGRM () Delete
Name: SENATUS, BENET
Address: 1013 MADISON AVE.
City-St-Zip: IMMOKALEE, FL 34132

Title: MGRM () Delete
Name: RODRIGUE, TILOR
Address: 10641 BAYTREE COURT
City-St-Zip: LEHIGH ACRES, FL 34142

Title: MGRM () Delete
Name: TAYLOR, RONNIE
Address: 655 MUSCOGEE DRIVE
City-St-Zip: NORTH FORT MYERS, FL 33903

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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.

SIGNATURE: STAN BIGELEISEN

MGR

01/15/2009

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