

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000094549

Entity Name: NORTH STAR FARM, LLC

FILED
Jul 26, 2006
Secretary of State

Current Principal Place of Business:

2433 COUNTY ROAD 673
BUSHNELL, FL 33513 US

New Principal Place of Business:

Current Mailing Address:

2433 COUNTY ROAD 673
BUSHNELL, FL 33513 US

New Mailing Address:

FEI Number: 20-3947070 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

WEBER, DIANE L MGRM
2433 COUNTY ROAD 673
BUSHNELL, FL 33513 US

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: DIANE L. WEBER

07/26/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: WEBER, DIANE L
Address: 2433 COUNTY ROAD 673
City-St-Zip: BUSHNELL, FL 33513 US

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

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: WEBER, DIANE L MANAGER
Address: 2433 COUNTY ROAD 673
City-St-Zip: BUSHNELL, FL 33513 US

Title: MGRM () Change (X) Addition
Name: REDOS, AARON D MEMBER
Address: 2433 COUNTY ROAD 673
City-St-Zip: BUSHNELL, FL 33513

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: DIANE L. WEBER

MGRM

07/26/2006

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