

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000096792

Entity Name: KEMP FARMS, LLC

FILED  
May 01, 2008  
Secretary of State

**Current Principal Place of Business:**

9525 EHREN CUT OFF  
LAND O' LAKES, FL 34639

**New Principal Place of Business:**

**Current Mailing Address:**

9525 EHREN CUT OFF  
LAND O' LAKES, FL 34639

**New Mailing Address:**

FEI Number: 20-3614410      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:**

**Name and Address of New Registered Agent:**

KEMP, DONA R  
9525 EHREN CUT OFF  
LAND O' LAKES, FL 34639      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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: KEMP, JAMES L  
Address: 9525 EHREN CUT OFF  
City-St-Zip: LAND O' LAKES, FL 34639

Title: MGRM ( ) Delete  
Name: KEMP, DONA R  
Address: 9525 EHREN CUT OFF  
City-St-Zip: LAND O' LAKES, FL 34639

**ADDITIONS/CHANGES:**

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: TRENT G SNIDER

CPA

05/01/2008

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