

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000016196

Entity Name: LEWIS AGRICULTURE LLC

FILED
Apr 17, 2009
Secretary of State

Current Principal Place of Business:

2654 MARCH CIRCLE
LOXAHATCHEE, FL 33470 US

New Principal Place of Business:

Current Mailing Address:

2654 MARCH CIRCLE
LOXAHATCHEE, FL 33470 US

New Mailing Address:

FEI Number: 04-3845038

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEWIS, BERBETH
2654 MARCH CIRCLE
LOXAHATCHEE, FL 33470 US

Name and Address of New Registered Agent:

LEWIS, BERBETH
2654 MARCH CIRCLE
LOXAHATCHEE, FL 33470 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: BERBETH LEWIS

04/17/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: LEWIS, BERBETH
Address: 2654 MARCH CIRCLE
City-St-Zip: LOXAHATCHEE, FL 33470 US

Title: MGRM () Delete
Name: LEWIS, HENRY A
Address: 2654 MARCH CIRCLE
City-St-Zip: LOXAHATCHEE, FL 33470 US

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

ADDITIONS/CHANGES:

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

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

Title: MGRM () Change (X) Addition
Name: LEWIS, GEOFFREY H
Address: 2654 MARCH CIRCLE
City-St-Zip: LOXAHATCHEE, FL 33470 US

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: BERBETH LEWIS

MGRM

04/17/2009

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