


FILED
Apr 02, 2007 8:00 am
Secretary of State

01-31-2007 90086 012 ****50.00

**2007 LIMITED LIABILITY COMPANY
 ANNUAL REPORT**

30003754

DOCUMENT # L06000045262					
1. Entity Name MISSION FARMS JOCKEY CLUB INVESTMENT, LLC					
Principal Place of Business 13412 57TH PLACE SOUTH WELLINGTON, FL 33467			Mailing Address 13412 57TH PLACE SOUTH WELLINGTON, FL 33467		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 20-4796220	
Zip	Country	Zip	Country	5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent METZGER, JOHN T ESQ. MCDONALD HOPKINS CO., P.A. 250 AUSTRALIAN AVENUE SOUTH, SUITE 700 WEST PALM BEACH, FL 33401			7. Name and Address of New Registered Agent Name FRANKLIN HOET Street Address (P.O. Box Number is Not Acceptable) 13412 57TH PLACE SOUTH City WELLINGTON FL 33467		
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <u><i>Franklin Hoet</i></u> (NOTE: Registered Agent signature required when reinstating) DATE <u>01/23/2007</u>					
Filing Fee is \$50.00 Due by May 1, 2007		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR HOET-LINARES, FRANKLIN 13412 57TH PLACE SOUTH WELLINGTON, FL 33467 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: <u><i>Franklin Hoet</i></u>		DATE: <u>01/23/07</u> DAYTIME PHONE: <u>561-3836793</u>			
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE		DATE			



01122007 Chg-LLC CR2E083 (12/06)

Applied For Not Applicable

5. Certificate of Status Desired \$5.00 Additional Fee Required

Name **FRANKLIN HOET**
 Street Address (P.O. Box Number is Not Acceptable)
13412 57TH PLACE SOUTH
 City **WELLINGTON** FL **33467**

SIGNATURE *Franklin Hoet* (NOTE: Registered Agent signature required when reinstating) DATE 01/23/2007

Filing Fee is \$50.00
 Due by May 1, 2007

Make check payable to
 Florida Department of State

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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE DATE