2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

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DOCUMENT # L06000057531

1. Entity Name 3W FARMS, LLC



FILED Feb 19, 2008 08:00 AM Secretary of State

Principal Place of Business

4912 COUNTY ROAD 306A LAKE PANASOFFKEE, FL 33538 Mailing Address

4912 COUNTY ROAD 306A LAKE PANASOFFKEE, FL 33538



01302008 No Chg-LLC

CR2E083 (12/07)

4. FEt Number 20-5015397

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional

6. Name and Address of Current Registered Agent

WELLS, MARJORIE J 4912 COUNTY ROAD 306A LAKE PANASOFFKEE, FL 33538

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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 the obligations of registered agent.	am familiar with, and accept
SIGNATURE Signature, typed or printed name of registered agent and title ill applicable. (NOTE: Registered Agent aignature required when retinatating) DA	TTF

FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 000000832034 02/27/08-80043-004 138.75

MANAGING MEMBERS/MANAGERS MGR TITLE WELLS, MARJORIE J NAME STREET ADDRESS 4912 COUNTY ROAD 306A LAKE PANASOFFKEE, FL 33538 CITY-ST-7/P TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY - ST - ZiP NAME STREET ADDRESS CITY-ST-ZIP TITLE. NAME STREET ADDRESS CITY-ST-ZIP

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11. I hereby certify that the information supplied with this filling 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 emportaged to execute this report as required by Chapter 608. Florida Statutes.

SIGNATURE

TURE AND TYPED OR PRINTED JAME OF SIGNING W

LAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

2/11/08 352 793-3924