2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 16, 2007
Secretary of State

DOCUMENT# L06000076739

Entity Name: OVERLOOK HARVESTING COMPANY, LLC

Current Principal Place of Business:

2600 OVERLOOK DRIVE
WINTER HAVEN, FL

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 9516
WINTER HAVEN, FL 33883

New Mailing Address:

FEI Number: 20-5399333 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CLINE, DEBRA L
141 5TH STREET
WINTER HAVEN, FL 33883 US

Name and Address of New Registered Agent:

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: BENTLEY, ROBERT W JR.
Address: 2600 OVERLOOK DRIVE
City-St-Zip: WINTER HAVEN, FL

Title: MGRM ( ) Delete
Name: BENTLEY, ROBERT O JR.
Address: 2600 OVERLOOK DRIVE
City-St-Zip: WINTER HAVEN, FL

Title: MGRM ( ) Delete
Name: BENTLEY, JASON P
Address: 2600 OVERLOOK DRIVE
City-St-Zip: WINTER HAVEN, FL

ADDITIONS/CHANGES:

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

Title: MGRM (X) Change ( ) Addition
Name: BENTLEY, RAYMOND O JR.
Address: 2600 OVERLOOK DRIVE
City-St-Zip: WINTER HAVEN, FL

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

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: JASON P BENTLEY MGRM 02/16/2007

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