

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000097947

Entity Name: TWIN HORSE FARM, LLC

FILED
Jan 11, 2007
Secretary of State

Current Principal Place of Business:

13105 N.W. LEJEUNE ROAD
OPA-LOCKA, FL 33054

New Principal Place of Business:

Current Mailing Address:

13105 N.W. LEJEUNE ROAD
OPA-LOCKA, FL 33054

New Mailing Address:

FEI Number: 20-5689170

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SEIF, EVAN D
2800 PONCE DE LEON BLVD., SUITE 1125
CORAL GABLES, FL 33134 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: () Delete
Name:
Address:
City-St-Zip:

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

ADDITIONS/CHANGES:

Title: MGR () Change (X) Addition
Name: HOLLAND, BRIAN K
Address: 13105 N.W. 42ND AVE.
City-St-Zip: OPA LOCKA, FL 33054

Title: MGR () Change (X) Addition
Name: HOLLAND, ANDREA B
Address: 13105 N.W. 42ND AVE.
City-St-Zip: OPA LOCKA, FL 33054

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: BRIAN HOLLAND

MGR

01/11/2007

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