

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000104610

FILED  
Jan 05, 2008  
Secretary of State

Entity Name: NEWBERRY ENTERPRISES, LLC

**Current Principal Place of Business:**

1761 34TH AVENUE NW  
OCALA, FL 34475

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 3038  
OCALA, FL 34478

**New Mailing Address:**

FEI Number: 20-5639427

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

WISE, LOUIE F III  
8159 SW 34TH PLACE  
OCALA, FL 34481 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: WISE, PAMELA A  
Address: 8159 SW 34TH PLACE  
City-St-Zip: OCALA, FL 34481

Title: MGR ( ) Delete  
Name: KELLY, LLOYD G  
Address: P.O. BOX 1027  
City-St-Zip: NEWBERRY, FL 32669

**ADDITIONS/CHANGES:**

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

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

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: PAMELA A WISE

MGM

01/05/2008

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