

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000002747

FILED
Mar 25, 2009
Secretary of State

Entity Name: TRIPLE J CITRUS & FARMING LLC

Current Principal Place of Business:

24535 LOBLOLLY BAY ROAD SW
LABELLE, FL 33935

New Principal Place of Business:

Current Mailing Address:

24535 LOBLOLLY BAY ROAD SW
LABELLE, FL 33935

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JARAMILLO & FREEMAN, P.A.
4245 FOWLER STREET
FORT MYERS, FL 33901 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: MGR () Delete
Name: FREEMAN, JEFFREY
Address: 24535 LOBLOLLY BAY ROAD SW
City-St-Zip: LABELLE, FL 33935

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

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

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

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

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

ADDITIONS/CHANGES:

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

Title: MGR () Change (X) Addition
Name: FREEMAN, JEFFREY
Address: 25435 LOBLOLLY BAY RD.SW
City-St-Zip: LABELLE, FL 33935

Title: MGR () Change (X) Addition
Name: FREEMAN, JEFFREY
Address: 25435 LOBLOLLY BAY RD.SW
City-St-Zip: LABELLE, FL 33935

Title: MGR () Change (X) Addition
Name: FREEMAN, JEFFREY
Address: 25435 LOBLOLLY BAY RD.SW
City-St-Zip: LABELLE, FL 33935

Title: MGR () Change (X) Addition
Name: FREEMAN, JEFFREY
Address: 25435 LOBLOLLY BAY RD.SW
City-St-Zip: LABELLE, FL 33935

Title: MGR () Change (X) Addition
Name: FREEMAN, JEFFREY
Address: 25435 LOBLOLLY BAY RD.SW
City-St-Zip: LABELLE, FL 33935

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: JEFFREY FREEMAN

MGR

03/25/2009

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