

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000002747

FILED
Jan 18, 2011
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:

4245 FOWLER STREET
FORT MYERS, FL 33901

Current Mailing Address:

24535 LOBLOLLY BAY ROAD SW
LABELLE, FL 33935

New Mailing Address:

4245 FOWLER STREET
FORT MYERS, FL 33901

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 FREEMAN LAW FIRM, P.A.
4245 FOWLER STREET
FORT MYERS, FL 33901 US

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: THE FREEMAN LAW FIRM, P.A.

01/18/2011

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: FREEMAN, JEFFREY
Address: 24535 LOBLOLLY BAY ROAD SW
City-St-Zip: LABELLE, FL 33935

Title: VP
Name: FREEMAN, BRIAN
Address: 4245 FOWLER STREET
City-St-Zip: FORT MYERS, FL 33901

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

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

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

I hereby 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 FREEMAN

VP

01/18/2011

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