

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000071046

FILED
Apr 24, 2009
Secretary of State

Entity Name: CATTLEMAN'S FEED NORTH, L.L.C.

Current Principal Place of Business:

109 N LAKE AVE
GROVELAND, FL 34736 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 1573
POLK CITY, FL 33868 US

New Mailing Address:

FEI Number: 59-2197676

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FUSSELL, KAYLON
9450 VOYLES LOOP RD
POLK CITY, FL 33868 US

Name and Address of New Registered Agent:

FUSSELL, KAYLON
9833 FOX CENTRAL
POLK CITY, FL 33868 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: _____

04/24/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: FUSSELL, KAYLON
Address: P O BOX 1573
City-St-Zip: POLK CITY, FL 33868 US

Title: MGRM () Delete
Name: RODRIGUEZ, SETH
Address: P O BOX 1573
City-St-Zip: POLK CITY, FL 33868 US

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: KAYLON FUSSELL

MGR

04/24/2009

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