

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000092634

**Entity Name:** MILLER FARMS, LLC

**FILED**  
**Feb 08, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

3615 COUNTY ROAD 621 EAST  
LAKE PLACID, FL 33852

**New Principal Place of Business:**

**Current Mailing Address:**

3615 COUNTY ROAD 621 EAST  
LAKE PLACID, FL 33852

**New Mailing Address:**

**FEI Number:** 26-0730354

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

MILLER, JAMES W  
3615 COUNTY ROAD 621 EAST  
LAKE PLACID, FL 33852 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  
Name: MILLER, JAMES W  
Address: 421 CLOVERLEAF ROAD  
City-St-Zip: LAKE PLACID, FL 33852

Title: MGRM  
Name: D. TOPE & SONS INC.  
Address: P.O. BOX 127  
City-St-Zip: LAKE PLACID, FL 33862

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: JAMES W. MILLER

MGR

02/08/2010

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