

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000097218

Entity Name: SHERROD'S RANCH, LLC.

FILED  
Jan 29, 2009  
Secretary of State

**Current Principal Place of Business:**

1013 ROBERTS AVENUE  
IMMOKALEE, FL 34142

**New Principal Place of Business:**

1191 HERITAGE ROAD  
FELDA, FL 33930

**Current Mailing Address:**

P.O. BOX 875  
IMMOKALEE, FL 34143

**New Mailing Address:**

P.O. BOX 427  
FELDA, FL 33930

FEI Number: 26-2085754

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SHERROD, PHILLIP  
1009 ROBERTS AVENUE  
IMMOKALEE, FL 34142 US

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

SHERROD, PHILLIP  
1191 HERITAGE ROAD  
FELDA, FL 33930 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:

01/29/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: SHERROD, MILDRED R  
Address: 1013 ROBERTS AVENUE  
City-St-Zip: IMMOKALEE, FL 34142

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: SHERROD, PHILLIP C MANAGER  
Address: 1191 HERITAGE ROAD  
City-St-Zip: FELDA, FL 33930

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: PHILLIP C SHERROD

MR.

01/29/2009

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