

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000123942

FILED  
Apr 17, 2009  
Secretary of State

Entity Name: BEE BRANCH FARMS, LLC

**Current Principal Place of Business:**

3200 HOWARD ROAD  
LABELLE, FL 33935 US

**New Principal Place of Business:**

**Current Mailing Address:**

3200 HOWARD ROAD  
LABELLE, FL 33935 US

**New Mailing Address:**

FEI Number: 26-1608477      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

BEE BRANCH FARMS, INC.  
3200 HOWARD ROAD  
LABELLE, FL 33935 US

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

COBB, LEE W  
3200 HOWARD ROAD  
LABELLE, FL 33935 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: LEE W. COBB

04/17/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: BEE BRANCH FARMS, INC.  
Address: 3200 HOWARD ROAD  
City-St-Zip: LABELLE, FL 33935 US

Title: MGRM (X) Delete  
Name: MOLZAN ENTERPRISES, LTD  
Address: 819 DEL PRADO BOULEVARD  
City-St-Zip: CAPE CORAL, FL 33990 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: LEE W. COBB

MGR.

04/17/2009

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