

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000017205

Entity Name: BACKWATER CATTLE LLC

FILED  
Jan 20, 2009  
Secretary of State

**Current Principal Place of Business:**

5614 TREESTAND LN  
LAKELAND, FL 33811

**New Principal Place of Business:**

**Current Mailing Address:**

5614 TREESTAND LN  
LAKELAND, FL 33811

**New Mailing Address:**

FEI Number: 41-2269843

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

COLEMAN, DENNIS  
5614 TREESTAND LN  
LAKELAND, FL 33811 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 ( ) Delete  
Name: COLEMAN, DENNIS  
Address: 5614 TREESTAND LN  
City-St-Zip: LAKELAND, FL 33811

Title: MGRM ( ) Delete  
Name: WETHERINGTON, KENNETH  
Address: 905 COUNTRY LAKE CIR  
City-St-Zip: LAKE WALES, FL 33898

Title: MGRM ( ) Delete  
Name: PEREZ, FERNANDO  
Address: 1510 LYLE PKWY  
City-St-Zip: BARTOW, FL 33830

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: DENNIS COLEMAN

MGR

01/20/2009

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