

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000034106

**FILED**  
**Mar 24, 2011**  
**Secretary of State**

**Entity Name:** SEMINOLE CATTLE OPERATIONS, LLC

**Current Principal Place of Business:**

269 NW 9TH ST  
OKEECHOBEE, FL 34972

**New Principal Place of Business:**

SW MARTIN HIGHWAY  
OKEECHOBEE, FL 34974

**Current Mailing Address:**

P.O. BOX 1177  
OKEECHOBEE, FL 34973

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired ( )**

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

WALPOLE, EDWIN III  
269 NW 9TH STREET  
OKEECHOBEE, FL 34972      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:** MGRM  
**Name:** E WALPOLE, TEE, WALPOLE RVOC TR 12/5/95  
**Address:** 269 NW 9TH STREET  
**City-St-Zip:** OKEECHOBEE, FL 34972

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: EDWIN E WALPOLE III                      MGRM                      03/24/2011

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