

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000060632

Entity Name: SOMEROD FARMS, LLC

FILED
Apr 20, 2009
Secretary of State

Current Principal Place of Business:

7656 PORTSTEWART DRIVE
LAKEWOOD RANCH, FL 34202

New Principal Place of Business:

7656 PORTSTEWART DRIVE
LAKEWOOD RANCH, FL 34202 US

Current Mailing Address:

7656 PORTSTEWART DRIVE
LAKEWOOD RANCH, FL 34202

New Mailing Address:

7656 PORTSTEWART DRIVE
LAKEWOOD RANCH, FL 34202 US

FEI Number: 26-3008082

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EVERS, VICTORIA A
7656 PORTSTEWART DRIVE
LAKEWOOD RANCH, FL 34202 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 () Delete
Name: EVERS, VICTORIA A
Address: 7656 PORTSTEWART DRIVE
City-St-Zip: LAKEWOOD RANCH, FL 34202

Title: MGRM () Delete
Name: EVERS, MICHAEL S
Address: 7656 PORTSTEWART DRIVE
City-St-Zip: LAKEWOOD RANCH, FL 34202

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: EVERS, VICTORIA A
Address: 7656 PORTSTEWART DRIVE
City-St-Zip: LAKEWOOD RANCH, FL 34202 US

Title: MGRM (X) Change () Addition
Name: EVERS, MICHAEL S
Address: 7656 PORTSTEWART DRIVE
City-St-Zip: LAKEWOOD RANCH, FL 34202 US

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: VICTORIA A. EVERS

MGMR

04/20/2009

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