

**2009 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000070530

**FILED**  
**Jan 27, 2009**  
**Secretary of State**

**Entity Name:** MARTHA C KELLEY FARMS LLC

**Current Principal Place of Business:**

5907 GUMWOOD DRIVE  
JACKSONVILLE, FL 32277

**New Principal Place of Business:**

**Current Mailing Address:**

5907 GUMWOOD DRIVE  
JACKSONVILLE, FL 32277

**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:**

KELLEY, MARTHA C  
5907 GUMWOOD DRIVE  
JACKSONVILLE, FL 32277    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:           KELLEY, MARTHA C  
Address:        5907 GUMWOOD DRIVE  
City-St-Zip:   JACKSONVILLE, FL 32277

**ADDITIONS/CHANGES:**

Title:            MGMR    (X) Change ( ) Addition  
Name:           KELLEY, MARTHA C  
Address:        5907 GUMWOOD DRIVE  
City-St-Zip:   JACKSONVILLE, FL 32277

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: MARTHA C. KELLEY

MGMR

01/27/2009

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