2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 16, 2009
Secretary of State

DOCUMENT# L08000086370

Entity Name: NATURES TRADING COMPANY, LLC

Current Principal Place of Business:

1300 PINETREE DRIVE, SUITE 7
INDIAN HARBOR BEACH, FL 32937

New Principal Place of Business:

2194 HIGHWAY A1A
SUITE 206A
INDIAN HARBOR BEACH, FL 32937

Current Mailing Address:

1300 PINETREE DRIVE, SUITE 7
INDIAN HARBOR BEACH, FL 32937

New Mailing Address:

2194 HIGHWAY A1A
SUITE 206A
INDIAN HARBOR BEACH, FL 32937

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

Name and Address of Current Registered Agent:

PARTLOW, WILLIAM
214 ASHBOURNE COURT
MELBOURNE, FL 32940 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: PARTLOW, WILLIAM
Address: 214 ASHBOURNE COURT
City-St-Zip: MELBOURNE, FL 32940

Title: MGR ( ) Delete
Name: PARTLOW, SHERRY
Address: 100 KRISTI DRIVE
City-St-Zip: INDIAN HARBOUR BEACH, FL 32937

ADDITIONS/CHANGES:

Title: CFO (X) Change ( ) Addition
Name: PARTLOW, WILLIAM
Address: 214 ASHBOURNE COURT
City-St-Zip: MELBOURNE, FL 32940

Title: CEO (X) Change ( ) Addition
Name: PARTLOW, SHERRY
Address: 100 KRISTI DRIVE
City-St-Zip: INDIAN HARBOUR BEACH, FL 32937

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: WILLIAM PARTLOW CFO 03/16/2009

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