

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000068259

**FILED**  
**Feb 16, 2010**  
**Secretary of State**

**Entity Name:** DUHON FARMS LLC

**Current Principal Place of Business:**

2525 BATES AVE  
EUSTIS, FL 32736

**New Principal Place of Business:**

2539 BATES AVE  
EUSTIS, FL 32726

**Current Mailing Address:**

544 RESERVE DR  
TAVARES, FL 32778

**New Mailing Address:**

PO BOX 1193  
TAVARES, FL 32778

**FEI Number:** 27-0550125

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DUHON, RONALD U  
528 RESERVE DR  
TAVARES, FL 32778 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  
Name: DUHON, RONALD U  
Address: 528 RESERVE DR  
City-St-Zip: TAVARES, FL 32778

Title: MGR  
Name: WOSIKA, JEROME G  
Address: 544 RESERVE DR  
City-St-Zip: TAVARES, FL 32778

Title: MGR  
Name: KILGUS, JUDITH E  
Address: 528 RESERVE DR  
City-St-Zip: TAVARES, FL 32778

Title: MGR  
Name: WOSIKA, CHERYL L  
Address: 544 RESERVE DR  
City-St-Zip: TAVARES, FL 32778

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:** JEROME G. WOSIKA

MGR

02/16/2010

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