

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L98000000651

FILED  
Jan 29, 2005  
Secretary of State

**Entity Name:** WESTER AGRICULTURAL VENTURES, L.C.

**Current Principal Place of Business:**

22500 OKEECHOBEE RD  
FT PIERCE, FL 34945

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 12129  
FORT PIERCE, FL 34979

**New Mailing Address:**

**FEI Number:** 65-0839196

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WESTER, JERRY  
1590 COPENHAVER ROAD  
FORT PIERCE, FL 34945 US

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

WESTER, JERRY  
597 44TH AVENUE SW  
VERO BEACH, FL 32968 US

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:**

01/29/2005

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

**Title:** MGRM ( ) Delete  
**Name:** WESTER, JERRY WAYNE  
**Address:** 1590 COPENHAVER ROAD  
**City-St-Zip:** FORT PIERCE, FL 34945

**ADDITIONS/CHANGES:**

**Title:** MGRM (X) Change ( ) Addition  
**Name:** WESTER, JERRY WAYNE  
**Address:** 597 44TH AVENUE SW  
**City-St-Zip:** VERO BEACH, FL 32968

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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:** JERRY W WESTER

MGRM

01/29/2005

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