

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M00000002319

Entity Name: NATURIFE FARMS, LLC

FILED
Feb 07, 2012
Secretary of State

Current Principal Place of Business:

9450 CORKSCREW PALMS CIRCLE
SUITE 202
ESTERO, FL 33928

New Principal Place of Business:

Current Mailing Address:

9450 CORKSCREW PALMS CIRCLE
SUITE 202
ESTERO, FL 33928

New Mailing Address:

FEI Number: 59-3664178

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

AGUIRRE-BECK, ARIBEL
9450 CORKSCREW PALMS CIRCLE
SUITE 202
ESTERO, FL 33928 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: PRES
Name: FERGUSON, DWIGHT
Address: 9450 CORKSCREW PALMS CIRCLE
City-St-Zip: ESTERO, FL 33928 US

Title: V.P.
Name: AGUIRRE-BECK, ARIBEL
Address: 9970 ROOKERY CIRCLE
City-St-Zip: ESTERO, FL 33928 US

Title: V.P.
Name: BOCOCK, BRIAN
Address: 04726 COUNTY RD., 215
City-St-Zip: GRAND JUNCTION, MI 49056 US

Title: SVP
Name: VERLOOP, ROBERT
Address: 1020 MERRILL STREET
City-St-Zip: SALINAS, CA 93907

Title: DIR
Name: MOLLER, VICTOR
Address: AVE EL CONDOR 600 PISO 4, HUECHURABA
City-St-Zip: SANTIAGO, CH CHILE

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: ARIBEL AGUIRRE-BECK

V.P.

02/07/2012

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