

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M02000001923

Entity Name: CLOVER LEA FARM LLC

FILED  
May 04, 2004  
Secretary of State

## Current Principal Place of Business:

3034 HUNSINGER LANE REAR  
LOUIWSVILLE, KY 40220

## New Principal Place of Business:

3034 HUNSINGER LANE REAR  
LOUISVILLE, KY 40220

## Current Mailing Address:

3034 HUNSINGER LANE REAR  
LOUIWSVILLE, KY 40220

## New Mailing Address:

P.O. BOX 643462  
VERO BEACH, FL 32964

FEI Number: 61-1291702

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CASALINO, GREGG M  
3111 CARDINAL DR.  
VERO BEACH, FL 32963 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/MEMBERS:

Title: MGR ( ) Delete  
Name: LIEBERT, DENNIS J  
Address: P.O. BOX 20206  
City-St-Zip: LOUISVILLE, KY 40250

Title: MGR ( ) Delete  
Name: LIEBERT, COLLEEN M  
Address: P.O. BOX 20206  
City-St-Zip: LOUISVILLE, KY 40250

Title: MGR ( ) Delete  
Name: CUTTING, TRACY L  
Address: P.O. BOX 20206  
City-St-Zip: LOUISVILLE, KY 40250

Title: MGR ( ) Delete  
Name: LIEBERT, SARAH B  
Address: P.O. BOX 20206  
City-St-Zip: LOUISVILLE, KY 40250

## ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: SARAH B. LIEBERT

MGR

05/04/2004

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