2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 25, 2007 08:00 A
Secretary of State

DOCUMENT # M98000001405

1. Entity Name
FARMTRAC NORTH AMERICA, LLC

Principal Place of Business	Mailing Address
111 FAIRVIEW STREET TARBORO, NC 27886	P.O. BOX 1139 TARBORO, NC 27886

02132007 No Chg-LLC CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
56-2108513
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $50.00
Due by May 1, 2007

9. MANAGING MEMBERS/MANAGERS

TITLE	VCF
NAME	COBB, ALTON H JR
STREET ADDRESS	111 FAIRVIEW STREET
CITY-ST-ZIP	TARBORO, NC 27886
TITLE	MGR
NAME	NANDA, RAJAN
STREET ADDRESS	1515 MATHURA RD., FARIDIBAD
CITY-ST-ZIP	121 003 INDIA,
TITLE	MGR
NAME	CHADHA, ASHOK
STREET ADDRESS	1515 MATHURA RD., FARIDIBAD
CITY-ST-ZIP	121 003 INDIA,
TITLE	P
NAME	GHOSAL, PRANAB
STREET ADDRESS	111 FIARVIEW ST.
CITY-ST-ZIP	TARBORO, NC 27886
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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06/01/07-80003-020 50.00

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: _____ 5/24/07
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #