

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000000810

Entity Name: ROMA RANCH, LLC

Current Principal Place of Business:

105 GATOR BLVD
BELLE GLADE, FL 33430

Current Mailing Address:

PO BOX 454
BELLE GLADE, FL 33430

FEI Number: 20-2089010

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DUBOIS, SILVIA R
105 GATOR BLVD
BELLE GLADE, FL 33430 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: _____

Electronic Signature of Registered Agent

_____ Date

Authorized Person(s) Detail :

Title MGR
Name RODRIGUEZ, FRANCISCO
Address 105 GATOR BLVD.
City-State-Zip: BELLE GLADE FL 33430

Title MGR
Name RODRIGUEZ, ROBERTO
Address 105 GATOR BLVD
City-State-Zip: BELLE GLADE FL 33430

Title MGR
Name DUBOIS, SILVIA R
Address P.O. BOX 427
City-State-Zip: BELLE GLADE FL 33430

Title MGR
Name RODRIGUEZ, ADRIAN
Address P.O. BOX 454
City-State-Zip: BELLE GLADE FL 33430

Title MGR
Name RODRIGUEZ, PABLO
Address P.O. BOX 427
City-State-Zip: BELLE GLADE FL 33430

Title MGR
Name RODRIGUEZ, CARLOS
Address P.O. BOX 427
City-State-Zip: BELLE GLADE FL 33430

I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SILVIA R DUBOIS

MANAGER

01/13/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date