

**2013 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M10000000936

**Entity Name:** LOST PRAIRIE FARM, L.L.C.

**Current Principal Place of Business:**

14410 EQUESTRIAN WAY  
WELLINGTON, FL 33414

**Current Mailing Address:**

3630 MARLATT AVE  
MANHATTAN, KS 66503

**FEI Number:** 27-1832279

**Certificate of Status Desired:** No

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

CT CORPORATION SYSTEM  
1200 S PINE ISLAND ROAD  
PLANTATION, FL 33324 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 MGRM  
Name LINDERS, CLARK  
Address 3630 MARLATT AVE  
City-State-Zip: MANHATTAN KS 66503

Title MGRM  
Name LINDERS, CHRISTY  
Address 3630 MARLATT AVE  
City-State-Zip: MANHATTAN KS 66503

*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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** CHRISTY LINDERS

MGRM

03/06/2013

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date