

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000014903

FILED
Apr 20, 2009
Secretary of State

Entity Name: TRI-STATE PEANUT PRODUCERS, L.L.C.

Current Principal Place of Business:

5217 EIGHT AVENUE
MALONE, FL 32445

New Principal Place of Business:

Current Mailing Address:

PO BOX 157
MALONE, FL 32445

New Mailing Address:

FEI Number: 20-0856676

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBERTS, RUSSELL S
2879 MADISON STREET
MARIANNA, FL 32446 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: MGRM () Delete
Name: AVERETT, EDWIN L
Address: 6011 WEST STATE HIGHWAY 27
City-St-Zip: CHANCELLOR, AL 36316

Title: MGRM () Delete
Name: FORD, LARRY
Address: 5016 FORD ROAD
City-St-Zip: GREENWOOD, FL 32443

Title: MGRM () Delete
Name: MCCALLISTER, JEFF
Address: 1698 SOUTH STATE HIGHWAY 95
City-St-Zip: GORDON, AL 36343

Title: MGRM () Delete
Name: PITTMAN, JEFFERY C
Address: 6429 LOVEDALE ROAD
City-St-Zip: BASCOM, FL 32423

Title: MGRM () Delete
Name: CROFT, BILLY W
Address: 4795 OLD U.S. ROAD
City-St-Zip: MARIANNA, FL 32446

Title: MGRM () Delete
Name: MCARTHUR, LARRY
Address: 5567 HWY 2
City-St-Zip: BASCOM, FL 32423

ADDITIONS/CHANGES:

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

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

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

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Title: () Change () Addition
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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 exemption stated in Chapter 119, 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: LARRY FORD

MGRM

04/20/2009

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