

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000108573

FILED  
Feb 02, 2009  
Secretary of State

Entity Name: C.B.I. DISTRIBUTORS LLC

**Current Principal Place of Business:**

5800 COMMERCE RD  
MILTON, FL 32583 US

**New Principal Place of Business:**

**Current Mailing Address:**

4888 OLD GUERNSEY RD  
PACE, FL 32571 US

**New Mailing Address:**

FEI Number: 27-0132771      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

CAP'N BLACK'S INC.  
4888 OLD GUERNSEY RD  
PACE, FL 32571 US

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

BLACK, CHARLES E  
4888 OLD GUERNSEY RD  
PACE, FL 32571 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: CHARLES E BLACK

02/02/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: CAP'N BLACK'S INC.,  
Address: 4888 OLD GUERNSEY RD  
City-St-Zip: PACE, FL 32571 US

Title: MGRM ( ) Delete  
Name: BLACK, RONALD E  
Address: 5580 HAMILTON BRIDGE RD  
City-St-Zip: MILTON, FL 32570

Title: MGRM ( ) Delete  
Name: BLACK, NATHAN A  
Address: 4111 BUFORD LN  
City-St-Zip: MILTON, FL 32583

Title: MGRM ( ) Delete  
Name: BLACK, VICTORIA E  
Address: 4806 FAIROAKS DR  
City-St-Zip: PACE, FL 32571

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: CAP'N BLACK'S INC.,  
Address: 4888 OLD GUERNSEY RD  
City-St-Zip: PACE, FL 32571 US

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 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: CHARLES E BLACK

MGRM

02/02/2009

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