

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000054089

FILED
Apr 20, 2009
Secretary of State

Entity Name: PETER STELLAKIS FOODS, LLC

Current Principal Place of Business:

279 EAST EAU GALLIE BLVD.
MELBOURNE, FL 32937 US

New Principal Place of Business:

Current Mailing Address:

316 SCHOOL ROAD
INDIAN HARBOUR BEACH, FL 32937 US

New Mailing Address:

FEI Number: 20-4932302 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

SCHILLINGER, CHARLES A ESQUIRE
1311 BEDFORD DRIVE
MELBOURNE, FL 32940 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: STELLAKIS, PETER
Address: 316 SCHOOL ROAD
City-St-Zip: INDIAN HARBOUR BEACH, FL 32937 US

Title: MGRM () Delete
Name: STELLAKIS, PATRICIA
Address: 316 SCHOOL ROAD
City-St-Zip: INDIANHARBOUR BEACH, FL 32937 US

ADDITIONS/CHANGES:

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: PATRICIA STELLAKIS MGRM 04/20/2009

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