

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000077517

**FILED**  
**Apr 26, 2011**  
**Secretary of State**

**Entity Name:** MEDALLION GROWERS NORTH FLORIDA, LLC

**Current Principal Place of Business:**

15100 QUAIL ROOST DRIVE  
MIAMI, FL 33187 US

**New Principal Place of Business:**

27805 SW 197 AVENUE  
HOMESTEAD, FL 33031 US

**Current Mailing Address:**

15100 QUAIL ROOST DRIVE  
MIAMI, FL 33187 US

**New Mailing Address:**

27805 SW 197 AVENUE  
HOMESTEAD, FL 33031 US

**FEI Number:** 27-3096689

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

OSMAN, JACK  
15100 QUAIL ROOST DRIVE  
MIAMI, FL 33187 US

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

OSMAN, JACK  
27805 SW 197 AVENUE  
HOMESTEAD, FL 33031 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: \_\_\_\_\_

04/26/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: OSMAN, JACK  
Address: 27805 SW 197 AVENUE  
City-St-Zip: HOMESTEAD, FL 33031 US

Title: MGR  
Name: PERLMAN, RICHARD  
Address: 27805 SW 197 AVENUE  
City-St-Zip: HOMESTEAD, FL 33031 US

I hereby 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: RICHARD PERLMAN

MGR

04/26/2011

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