

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 29, 2008 08:00 A
Secretary of State

DOCUMENT # M03000001287 1. Entity Name DAIRICONCEPTS MANAGEMENT, L.L.C.	
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Principal Place of Business 3253 E CHESTNUT EXPRESSWAY SPRINGFIELD, MO 65802-2540	Mailing Address 10220 N AMBASSADOR DR KANSAS CITY, MO 64153
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02192008 No Chg-LLC CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number 43-1883246	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND ROAD
 PLANTATION, FL 33324

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

03/12/08-80007-001 138.75

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM DAIRY FARMERS OF AMERICA, INC. 10220 N. AMBASSADOR DR KANSAS CITY, MO 64153
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DO NOT WRITE IN THIS SPACE

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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.

Alex B. Bachelor
 Vice President-Legal
 Dairy Farmers of America, Inc.

SIGNATURE _____ **2-29-08**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #