

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M10000000857

FILED  
Apr 02, 2012  
Secretary of State

**Entity Name:** TREEHOUSE VITAMINS, LLC

**Current Principal Place of Business:**

900 N. SCHMIDT ROAD  
ROMEDEVILLE, IL 60446

**New Principal Place of Business:**

900 N SCHMIDT RD  
ROMEDEVILLE, IL 60446 US

**Current Mailing Address:**

405 GOLFWAY WEST DRIVE  
ATTN.: LEGAL DEPT.  
ST. AUGUSTINE, FL 32095

**New Mailing Address:**

900 N SCHMIDT RD  
ROMEDEVILLE, IL 60446 US

FEI Number: 26-3998197

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: MGR  
Name: BARNHOLT, BRANDON MGR  
Address: 900 N SCHMIDT RD  
City-St-Zip: ROMEDEVILLE, IL 60446 US

Title: MGR  
Name: MEYERS, CHRIS MGR  
Address: 900 N SCHMIDT RD  
City-St-Zip: ROMEDEVILLE, IL 60446 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: MICHELLE DONATO

POA

04/02/2012

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