2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 29, 2008
Secretary of State

DOCUMENT# M99000002097

Entity Name: CARGILL FLAVOR SYSTEMS US, LLC

Current Principal Place of Business:

15407 MCGINTY RD
WAYZATA, MN 55391

New Principal Place of Business:

Current Mailing Address:

PO BOX 5626
MINNEAPOLIS, MN 55440 56

New Mailing Address:

FEI Number: 23-3022084 **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:	PRES	( ) Delete
Name:	HAVASI, IMRE	
Address:	15407 MCGINTY RD	
City-St-Zip:	WAYZATA, MN 55391	
Title:	VP	( ) Delete
Name:	HALBACH, PATRICE	
Address:	15407 MC GINTY RD	
City-St-Zip:	WAYZATA, MN 55391	
Title:	TREA	( ) Delete
Name:	OLSON, JAYME	
Address:	15407 MC GINTY RD	
City-St-Zip:	WAYZATA, MN 55391	
Title:	SEC	( ) Delete
Name:	LUNDEEN, LILLIAN I	
Address:	15407 MC GINTY RD	
City-St-Zip:	WAYZATA, MN 55391	
Title:	SEC	( ) Delete
Name:	SMITH, JEANNE Y	
Address:	15407 MC GINTY RD	
City-St-Zip:	WAYZATA, MN 55391	
Title:	SEC	( ) Delete
Name:	CLEMENS, JAMES R	
Address:	15407 MC GINTY RD	
City-St-Zip:	WAYZAT, MN 55391	

ADDITIONS/CHANGES:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	AS	(X) Change ( ) Addition
Name:	LUNDEEN, LILLIAN I	
Address:	15407 MC GINTY RD	
City-St-Zip:	WAYZATA, MN 55391	
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: LILLIAN LUNDEEN AS 04/29/2008

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