2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000017263

City-St-Zip:

THE VILLAGES, FL 32162

FILED Apr 30, 2008 Secretary of State

Entity Name: L PATRICK & SONS ICE CREAM SALES AND DISTRIBUTION LLC

Current Principal Place of Business: New Principal Place of Business: 8640 SE 176TH LOWNDES PLACE 674 US HWY 441N THE VILLAGES, FL 32162 SUITE 506 LADY LAKE, FL 32159 **Current Mailing Address: New Mailing Address:** 674 US HWY 441N 674 US HWY 441N **SUITE #506** SUITE 506 LADY LAKE, FL 32159 LADY LAKE, FL 32159 FEI Number: 20-2374056 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: THE MILLHORN LAW FIRM L.L.C. 13710 US HWY 441 SUITE100 LADY LAKE, FL 32159 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: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete PATRICK, LORIMER D Name: Name: 8640 SE 176TH LOWNDES PLACE Address: Address: City-St-Zip: THE VILLAGES, FL 32162 City-St-Zip: Title: MGR () Delete Title: () Change () Addition PATRICK, FRANCES J Name: Name: Address: 8640 SE 176TH LOWNDES PLACE Address: City-St-Zip: THE VILLAGES, FL 32162 City-St-Zip: Title: MGR () Delete Title: MGR (X) Change () Addition PATRICK, PHILIP T HANSEN, BRIAN J Name: Name: 105 HIDDEN OAKS LN Address: Address: 419 LAKE DR City-St-Zip: LADY LAKE, FL 32159 City-St-Zip: OCALA, FL 34472 Title: MGR () Delete Title: MGR (X) Change () Addition Name: PATRICK, MELISSA L Name: HANSEN, MIKI L Address: 105 HIDDEN OAKS LN Address: 419 LAKE DR City-St-Zip: LADY LAKE, FL 65775 City-St-Zip: OCALA, FL 34472 Title: MGR (X) Delete Title: () Change () Addition PATRICK, CHRISTOPHER F Name: Name: 8640 SE 176TH LOWNDES PLACE Address: Address:

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.

City-St-Zip:

SIGNATURE: LORIMER D PATRICK MGR 04/30/2008