

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000005579

FILED
Jul 30, 2005
Secretary of State

Entity Name: VINTAGE GOURMET, L.L.C.

Current Principal Place of Business:

3005 EAST CERVANTES STREET
PENSACOLA, FL 32503

New Principal Place of Business:

3005 EAST CERVANTES STREET
PENSACOLA, FL 325036420

Current Mailing Address:

3005 EAST CERVANTES STREET
PENSACOLA, FL 32503

New Mailing Address:

3005 EAST CERVANTES STREET
PENSACOLA, FL 325036420

FEI Number: 59-3645648 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

SHEARLOCK, KEITH T MD
3005 CERVANTES STREET
PENSACOLA, FL 32503 US

Name and Address of New Registered Agent:

SHEARLOCK, KEITH T MD
3005 CERVANTES STREET
PENSACOLA, FL 325036420 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: _____

07/30/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: SHEARLOCK, KEITH T
Address: 3005 CERVANTES STREET
City-St-Zip: PENSACOLA, FL 32503

Title: MGRM (X) Delete
Name: SHEARLOCK, KATHERINE W
Address: 3005 CERVANTES STREET
City-St-Zip: PENSACOLA, FL 32503

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: SHEARLOCK, KEITH T
Address: 3005 CERVANTES STREET
City-St-Zip: PENSACOLA, FL 325036420

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: KEITH T. SHEARLOCK

DR.

07/30/2005

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