2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L00000007654

1. Entity Name
BIG RED TOMATO PACKERS, L.L.C.



FILED Apr 16, 2007 08:00 Al Secretary of State

Principal Place of Business

3401 OLEANDER AVENUE FORT PIERCE, FL 34982 Mailing Address

3401 OLEANDER AVENUE FORT PIERCE, FL 34982



03162007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number Applied For S9-2031647 Applied For Not Applicable

5. Certificate of Status Desired Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

NEILL, RICHARD V 311 SOUTH 2ND STREET FORT PIERCE, FL 34950

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)

DATE

Filing Fee is \$50.00 Due by May 1, 2007

9.	MANAGING MEMBERS/MANAGERS
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR NEILL, JAMES DAVID 3401 OLEANDER AVENUE FT PIERCE, FL 34982
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM NEILL, RICHARD V 311 SOUTH 2ND STREET FT PIERCE, FL 34982
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SOUTHSIDE SHOPPING CENTER, LIMITED 260 W. PINELOCH STREET ORLANDO, FL 32806
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM STANLEY, ALESIA 14337 COCO PLUM ROAD PALM BEACH GARDENS, FL 33418
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM OVERTON, KAREN 15349 COLLECTING CANAL ROAD LOXAHATCHEE, FL 33470
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM STANLEY, PATRICK 14337 COCO PLUM ROAD PALM BEACH GARDENS, FL 33418 certify that the information supplied with this filling does not qualify for the ex

U00000709845 04/25/07-80017-023 50.00

DO NOT WRITE IN THIS SPACE

11. I hereby certify that the information supplied with this filling 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 will 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 true ee prowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

Richard V. Neill

April 12, 2007 (772) 466-0700

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Daytime Phone #