

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 10, 2008 08:00 AM
Secretary of State

DOCUMENT # L00000007654

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



Principal Place of Business
**3401 OLEANDER AVENUE
FORT PIERCE, FL 34982**

Mailing Address
**3401 OLEANDER AVENUE
FORT PIERCE, FL 34982**



01212008No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2031647

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

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)

03/07/08 00001 020 138.75

**FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75**

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

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing 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 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: _____

Richard V. Neill

March 7, 2008 (772) 466-0700

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

Date

Daytime Phone #