## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L00000009746

Entity Name: SIX L'S HOLDINGS, LLC

FILED Jan 30, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 315 E. NEW MARKET ROAD IMMOKALEE, FL 34142 **Current Mailing Address: New Mailing Address:** P.O. BOX 3088 IMMOKALEE, FL 34143 FEI Number: 52-2264123 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: WEISINGER, SHERYL A WHITESMAN, GUY E 1715 MONROE STREET 315 E. NEW MARKET ROAD FORT MYERS, FL 33901 US IMMOKALEE, FL 34142 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: GUY E. WHITESMAN 01/30/2007 Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete SIX L'S PACKING COMP, ANY, INC. Name: Name: 315 E. NEW MARKET ROAD Address: Address: City-St-Zip: IMMOKALEE, FL 34142 City-St-Zip: Title: ( ) Delete Title: (X) Change ( ) Addition WEISINGER, SHERYL A Name: WEISINGER, SHERYL A Name: Address: 515 E. NEW MARKET RD Address: 315 E. NEW MARKET RD City-St-Zip: IMMOKALEE, FL 34142 City-St-Zip: IMMOKALEE, FL 34142 Title: () Delete Title: (X) Change ( ) Addition DESSAK, PETER DESSAK, PETER Name: Name: 315 E. NEW MARKET ROAD 315 E. NEW MARKET ROAD Address: Address: City-St-Zip: IMMOKALEE, FL 34142 City-St-Zip: IMMOKALEE, FL 34142 ( ) Change (X) Addition Title: () Delete Title: Name: Name: WEISINGER, JAIME 315 EAST NEW MARKET ROAD Address: Address: City-St-Zip: City-St-Zip: IMMOKALEE, FL 34142 US Title: () Delete Title: ( ) Change (X) Addition PRESS, MAXWELL L Name: Name: 315 EAST NEW MARKET ROAD Address: Address: City-St-Zip: City-St-Zip: IMMOKALEE, FL 34142 US Title: () Delete Title: ( ) Change (X) Addition PURSE, TOBY K Name: Name: Address: Address: 315 EAST NEW MARKET ROAD IMMOKALEE, FL 34142 US City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: TOBY K. PURSE V 01/30/2007