

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000015117

Entity Name: CAG LABORATORIES, L.L.C.

FILED
Feb 01, 2011
Secretary of State

Current Principal Place of Business:

4645 NW 8TH AVENUE
GAINESVILLE, FL 32605

New Principal Place of Business:

Current Mailing Address:

4645 NW 8TH AVENUE
GAINESVILLE, FL 32605

New Mailing Address:

FEI Number: 59-3698955

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WALKER, GARY
100 S. ASHLEY DRIVE
SUITE 1500
TAMPA, FL 33602 US

Name and Address of New Registered Agent:

ROARK, STEVEN F
4645 NW 8TH AVENUE
GAINESVILLE, FL 32605 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: STEVEN F. ROARK

02/01/2011

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: SILVERSTEIN, BURTON V
Address: 4645 NW 8TH AVENUE
City-St-Zip: GAINESVILLE, FL 32605

Title: MGRM
Name: WERBEL, BRIAN
Address: 4645 NW 8TH AVENUE
City-St-Zip: GAINESVILLE, FL 32605

Title: P
Name: ROARK, STEVEN F
Address: 4645 NW 8TH AVENUE
City-St-Zip: GAINESVILLE, FL 32605

Title: V
Name: O'MEARA, JAMES J
Address: 4645 NW 8TH AVENUE
City-St-Zip: GAINESVILLE, FL 32605

Title: MGRM
Name: GROS, BERNARD L
Address: 4645 NW 8TH AVENUE
City-St-Zip: GAINESVILLE, FL 32605

Title: MGRM
Name: SMOCK, ANDREW L
Address: 4645 NW 8TH AVENUE
City-St-Zip: GAINESVILLE, FL 32605

I hereby 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: STEVEN F. ROARK

MGRM

02/01/2011

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