

**2008 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

DOCUMENT # L02000003441

1. Entity Name  
MONTICELLO MILLING COMPANY, LLC



Principal Place of Business  
700 EAST YORK STREET  
MONTICELLO, FL 32344

Mailing Address  
700 EAST YORK STREET  
MONTICELLO, FL 32344

**DO NOT WRITE IN THIS SPACE**

**FILED**  
**Jul 07, 2008 08:00 AM**  
**Secretary of State**



07052008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number  
03-0388429

Applied For  
Not Applicable

5. Certificate of Status Desired

☒ \$5.00 Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

BIRD, T. BUCKINGHAM  
165 EAST DOGWOOD STREET  
MONTICELLO, FL 32344

**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

**FILE NOW!!! FEE IS \$538.75**  
**Due by September 12, 2008**

**9. MANAGING MEMBERS/MANAGERS**

TITLE	MGRM
NAME	BISHOP, BENJAMIN D
STREET ADDRESS	539 SEVEN BRIDGES RD
CITY- ST- ZIP	MONTICELLO, FL 32344
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

U00000953627  
07/07/08-80006-009 543.75

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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:

*Benjamin D. Bishop*

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

7-5-08

Date

850-997-5521

Daytime Phone #