

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000008629

Entity Name: SEASONING STICKS, LLC

FILED  
Jan 12, 2005  
Secretary of State

## Current Principal Place of Business:

1760 S. DIMENSIONS TERRACE  
HOMOSASSA, FL 34448

## New Principal Place of Business:

4203 S. PURSLANE DR.  
HOMOSASSA, FL 34448

## Current Mailing Address:

1760 S. DIMENSIONS TERRACE  
HOMOSASSA, FL 34448

## New Mailing Address:

4203 S. PURSLANE DR.  
HOMOSASSA, FL 34448

FEI Number: 27-0042912

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

JENKINS, NEVIN  
1760 S. DIMENSIONS TERRACE  
HOMOSASSA, FL 34448 US

## Name and Address of New Registered Agent:

JENKINS, NEVIN  
4203 S. PURSLANE DR.  
HOMOSASSA, FL 34448 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: NEVIN C. JENKINS

01/12/2005

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MEMBERS:

Title: MGR ( ) Delete  
Name: JENKINS, NEVIN C  
Address: 1760 SO. DIMENSIONS TERR.  
City-St-Zip: HOMOSASSA, FL 34448

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: JENKINS, NEVIN C  
Address: 4203 S. PURSLANE DR.  
City-St-Zip: HOMOSASSA, FL 34448

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: NEVIN C. JENKINS

PRES

01/12/2005

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