

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 16, 2007 08:00 AM
Secretary of State

DOCUMENT # L02000008768

1. Entity Name
FRESH PRODUCE FILMS, LLC



Principal Place of Business

**ONE SOUTH SCHOOL AVENUE, SUITE 1000
SARASOTA, FL 34237**

Mailing Address

**ONE SOUTH SCHOOL AVENUE, SUITE 1000
SARASOTA, FL 34237**



01122007 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
04-3655528

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$5.00 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**NICHOLS, DAVID
ONE SOUTH SCHOOL AVENUE, SUITE 1000
SARASOTA, FL 34237**

**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 **0000007007594**

**Filing Fee is \$50.00
Due by May 1, 2007**

04/24/07-80125-010 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**MGR
MATZKIN, STEVEN R
1 S. SCHOOL AVE, STE 1000
SARASOTA, FL 34237**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**MGR
PERSINGER, MARSHALL
1 S SCHOOL AVE STE 1000
SARASOTA, FL 34237**

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

**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: *STEVEN R MATZKIN*

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

Date

Daytime Phone #