

**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 14, 2005 08:00 AM
Secretary of State

DOCUMENT # L02000011005

1. Entity Name
YUM YUM LAND COMPANY, L.L.C.



Principal Place of Business

403 EAST MAIN ST.
IMMOKALEE, FL 34142

Mailing Address

P.O. BOX 5309
IMMOKALEE, FL 34143



01072005No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
02-0647883

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

ARRIGO, BRIAN
403 EAST MAIN ST.
IMMOKALEE, FL 34142

**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

Filing Fee is \$50.00
Due by May 1, 2005

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	ARRIGO, BRIAN
STREET ADDRESS	403 EAST MAIN ST.
CITY - ST - ZIP	IMMOKALEE, FL 34142
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
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TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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01/14/05-80008-022 50.00

**DO NOT WRITE
IN THIS SPACE**

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

B A

1-10-05

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

Date

Daytime Phone #