


# 2008 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT # L02000015816		
1. Entity Name CRISPERS, L.L.C.		

Principal Place of Business 3300 PUBLIX CORPORATE PKWY LAKELAND, FL 33811	Mailing Address PO BOX 407 LAKELAND, FL 33802
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2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

FILED  
08 JUN -9 AM 7:58  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



05222008 Chg-LLC CR2E083 (12/06)

4. FEI Number 82-0555311	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
ATTAWAY, JOHN 3300 PUBLIX CORPORATE PKWY LAKELAND, FL 33811		Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	

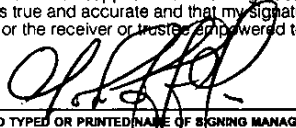
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Amended AR is \$50.00	Make check payable to Florida Department of State
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9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM PUBLIX SUPER MARKETS, INC. <input type="checkbox"/> Delete 3300 PUBLIX CORPORATE PKWY LAKELAND, FL 33811	TITLE NAME STREET ADDRESS CITY-ST-ZIP	900131229583 <input type="checkbox"/> Change <input type="checkbox"/> Addition 06/12/08--01014--011 ***122.50
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM PUBLIX SUPER MARKETS, INC. <input type="checkbox"/> Delete 3300 AIRPORT ROAD LAKELAND, FL 33811	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MYERS, DALE S <input type="checkbox"/> Delete 3300 PUBLIX CORPORATE PKWY LAKELAND, FL 33811	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR PHILLIPS, DAVID P <input type="checkbox"/> Delete 3300 PUBLIX CORPORATE PKWY LAKELAND, FL 33811	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR ATTAWAY, JOHN A JR <input type="checkbox"/> Delete 3300 PUBLIX CORPORATE PKWY LAKELAND, FL 33811	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR Mark R. Inby <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 3300 Publix Corporate Parkway Lakeland, FL 33811-3311

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:  John A. Attaway, Jr., Sec. 5/29/2008 863-66-5701  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

R. 6/10