

**2006 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

DOCUMENT # L02000026796

1. Entity Name  
SWEETENER SOLUTIONS, LLC



Principal Place of Business

810 SATURN STREET, SUITE 1600  
JUPITER, FL 33477

Mailing Address

810 SATURN STREET, SUITE 1600  
JUPITER, FL 33477

P.O. Box 1026  
Savannah, GA 31402

**DO NOT WRITE IN THIS SPACE**

6. Name and Address of Current Registered Agent

SCOTT, MIKE  
810 SATURN STREET, SUITE 1600  
JUPITER, FL 33477



07312006 No Chg-LLC CR2E083 (11/05)

4. FEI Number NOT APPLICABLE	Applied For Not Applicable
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5. Certificate of Status Desired  \$5.00 Additional Fee Required

**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: 8-10-06

Filing Fee is \$50.00  
Due by September 6, 2006

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	SCOTT, MIKE
STREET ADDRESS	810 SATURN STREET, SUITE 1600
CITY-ST-ZIP	JUPITER, FL 33477

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
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NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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:

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

8-10-06

912-748-7177

Date

Daytime Phone #