



2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 28, 2005 8:00 am
Secretary of State

03-28-2005 90290 042 ****50.00

DOCUMENT # L03000003663 1. Entity Name FIRST COAST FOODS, LLC																													
Principal Place of Business 3779 WEST STATE ROAD 200 CALLAHAN, FL 32011 US				Mailing Address 3779 WEST STATE ROAD 200 CALLAHAN, FL 32011 US																									
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip Country		3. Mailing Address Suite, Apt. #, etc. City & State Zip Country		40041059  03012005 Chg-LLC CR2E083 (10/03) 4. FEI Number APPLIED FOR 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 ARMSTRONG, RICKEY 3779 WEST STATE ROAD 200 CALLAHAN, FL 32011																									
7. Name and Address of New Registered Agent 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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>																									
Filing Fee is \$50.00 Due by May 1, 2005		Make check payable to Florida Department of State																											
9. MANAGING MEMBERS/MANAGERS				10. ADDITIONS/CHANGES																									
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11. I hereby certify that the information supplied with this filing does not qualify 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 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: <i>Rickey H. Armstrong</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>				3-22-05 904-879-3121 <small>Date Daytime Phone #</small>																									