

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000009635

FILED
Jan 21, 2009
Secretary of State

Entity Name: MONGERSON FAMILY COOPERATIVE, L.L.C.

Current Principal Place of Business:

601 W. OCEAN DRIVE, #402
KEY COLONY BEACH, FL 33051

New Principal Place of Business:

Current Mailing Address:

5221 TOWBRIDGE DR.
HUDSON, OH 44236

New Mailing Address:

FEI Number: 16-1670236

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DEVANE, WILLIAM N JR
5701 OVERSEAS HIGHWAY, SUITE 12
MARATHON, FL 33050 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: FRIEND, LAURA M
Address: 5221 TOWBRIDGE DR.
City-St-Zip: HUDSON, OH 44236

Title: MGRM () Delete
Name: GILLEY, CAROL M
Address: 130 TERRY RD
City-St-Zip: FOUNTAIN INN, SC 29644

Title: MGRM () Delete
Name: MONGERSON, JOHN P
Address: 3687 WAPLES CREST CT
City-St-Zip: OAKTON, VA 22124

Title: MGRM () Delete
Name: SCHILLIGO, SUSAN M
Address: 9 ROOSTER TAIL CT
City-St-Zip: DEFIANCE, MO 63341

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: LAURA M. FRIEND

MGRM

01/21/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date