2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000026631

Entity Name: FRESH VINTAGE, LLC

FILED Jun 07, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

9-1/2 SE FORT KING STREET 9-1/2 E FORT KING STREET

OCALA, FL 34470 OCALA, FL 34471

Current Mailing Address: New Mailing Address:

9-1/2 SE FORT KING STREET 9-1/2 E FORT KING STREET

OCALA, FL 34470 OCALA, FL 34471

FEI Number: 20-0601691 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SWIGERT, BRETT L

PRUE, CLARA L 9 1/2 E FORT KING STREET 531 N. BAÝ STREET EUSTIS, FL 32726 US OCALA, FL 34471

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: CLARA L. PRUE 06/07/2007

> Electronic Signature of Registered Agent Date

> > ADDITIONS/CHANGES:

PRUE, CLARA L

OCALA, FL 34471

VAUGHN, DENA F

OCALA, FL 34471

MGRM

9-1/2 E FORT KING STREET

9 1/2 E FORT KING STREET

(X) Change () Addition

(X) Change () Addition

Title:

Title:

Name:

Address:

City-St-Zip:

Name:

Address:

City-St-Zip:

MANAGING MEMBERS/MANAGERS:

MGR () Delete

PRUE, CLARA L Name:

Address: 9-1/2 SE FORT KING STREET

City-St-Zip: OCALA, FL 34470

Title: MBR () Delete Name: VAUGHN, DENA F

Address: 9 1/2 SE FORT KING STREET

City-St-Zip: OCALA, FL 34470

Title: () Delete Title: MGRM () Change (X) Addition

Name: SWANSON, JAMIE A Name: Address: Address: 9 1/2 E FORT KING STREET

City-St-Zip: City-St-Zip: OCALA, FL 34471

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: JAMIE A SWANSON **MGRM** 06/07/2007