

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000014903

FILED  
Apr 20, 2009  
Secretary of State

Entity Name: TRI-STATE PEANUT PRODUCERS, L.L.C.

**Current Principal Place of Business:**

5217 EIGHT AVENUE  
MALONE, FL 32445

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 157  
MALONE, FL 32445

**New Mailing Address:**

FEI Number: 20-0856676

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ROBERTS, RUSSELL S  
2879 MADISON STREET  
MARIANNA, FL 32446 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: AVERETT, EDWIN L  
Address: 6011 WEST STATE HIGHWAY 27  
City-St-Zip: CHANCELLOR, AL 36316

Title: MGRM ( ) Delete  
Name: FORD, LARRY  
Address: 5016 FORD ROAD  
City-St-Zip: GREENWOOD, FL 32443

Title: MGRM ( ) Delete  
Name: MCCALLISTER, JEFF  
Address: 1698 SOUTH STATE HIGHWAY 95  
City-St-Zip: GORDON, AL 36343

Title: MGRM ( ) Delete  
Name: PITTMAN, JEFFERY C  
Address: 6429 LOVEDALE ROAD  
City-St-Zip: BASCOM, FL 32423

Title: MGRM ( ) Delete  
Name: CROFT, BILLY W  
Address: 4795 OLD U.S. ROAD  
City-St-Zip: MARIANNA, FL 32446

Title: MGRM ( ) Delete  
Name: MCARTHUR, LARRY  
Address: 5567 HWY 2  
City-St-Zip: BASCOM, FL 32423

**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:

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: LARRY FORD

MGRM

04/20/2009

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