


2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Aug 11, 2005 8:00 am
Secretary of State

08-11-2005 90066 030 ****55.00

DOCUMENT # L05000000043 1. Entity Name HORIZON WHOLESALE FOODS, L.L.C.					
Principal Place of Business 5976 MOORS OAK DRIVE MILTON, FL 32583			Mailing Address 5976 MOORS OAK DRIVE MILTON, FL 32583		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
LEUCHTMAN, GARY B 501 COMMENDENCIA STREET PENSACOLA, FL 32502			Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>		
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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</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		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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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>Jeff Parr</i> Jeff Parr			8/8/05 228-366-0073		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE			Date Daytime Phone #		



ATTACHMENT
20066571
Division of Corporations

2005 Annual Report

**Listed below is the most recent information reported for the entity.
Please review and click the appropriate button at the bottom to generate the annual
report form.**

This information cannot be changed on the report.	
Document Number	L05000000043
Business Entity Name	HORIZON WHOLESALE FOODS, L.L.C.
Original File Date	12/30/2004

FEI Number **20-2271012**

Principal Address 5976 MOORS OAK DRIVE
MILTON, FL 32583

Mailing Address 5976 MOORS OAK DRIVE
MILTON, FL 32583

Registered Agent GARY B LEUCHTMAN
501 COMMENDENCIA STREET
PENSACOLA, FL 32502 US

Managing Member/Manager Name And Address

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